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(57) Abstract

The present invention relates to compositions for the protection, treatment and repair of connective tissues in humans and animals comprising any or all of anabolic, anti-catabolic, anti-oxidant and analgesic agents, including aminosugars, S-adenosylmethionine, arachadonic acid, GAGs, including pentosan, collagen type II, tetracyclines or tetracycline-like compounds, diacerin, super oxide dismutase, L-ergothionine, one or more avocado/soybean unsaponifiables, hydroxyproline and an analgesic, e.g., acetaminophen, and to methods of treating humans and animals by administration of these novel compositions to humans and animals in need thereof.

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THE USE OF ANABOLIC AGENTS, ANTI-CATABOLIC AGENTS,
ANTIOXIDANT AGENTS, AND ANALGESICS FOR PROTECTION, TREATMENT
AND REPAIR OF CONNECTIVE TISSUES IN HUMANS AND ANIMALS.

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Field of the Invention:

The present invention relates to compositions for the protection, treatment and repair of connective tissues in humans and other animals.

Background of the Invention:

The tissues of mammals, including humans, are in a constant state of flux between the anabolic processes that build up tissues, and the catabolic processes which degrade tissues. The state of health exists when there is a balance between these two processes, and derangements of the balance produce disease. This holds true for all tissues of the body. Connective tissues are of particular importance for several reasons. First, they support the "functional cells" of the body, i.e., epithelial, muscle and neural cells. Second, they play critical roles in intercellular communication, which is essential for multicellular life.

The inflammatory process occupies a key position in this balance. When injury to tissues occurs, inflammation initiates the biochemical processes that result in tissue repair. Because inflammation results in the symptoms of pain, inflammation, and swelling of the tissues involved, it is often regarded by both patients and physicians as an abnormal and undesirable state, which should be treated and relieved as soon and as completely as possible. As a result, pharmacies are full of "anti-inflammatory drugs" (such as corticosteroids and the non-steroidal anti-inflammatory drugs, such as aspirin). Under certain circumstances, inflammation can indeed be destructive; however, it is important to remember that inflammation is closely linked with tissue healing. Indeed, inflammation is not easily categorized as strictly anabolic or catabolic -- it may have either effect. Its purpose in the body is to remove, dilute or wall-off the injurious

agent(s). It also sets into motion the biochemical processes that repair and reconstruct the damaged tissue. Because it is essential to healing, and because it can also cause tissue destruction, inflammation and its mediators are important factors in the anabolic and catabolic balance.

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One very important class of inflammatory mediators is the eicosanoid group. The eicosanoids are synthesized in the body from essential fatty acids ("FAs"). Through a series of biochemical reactions, the precursor fatty acids are modified to produce intermediate metabolites, arachadonic acid ("AA"), an omega-6 FA; and eicosapentanoic acid ("EPA"), an omega-3 FA. Eicosanoids produced from arachidonic acid include the 2-series of prostaglandins and the 4-series of leukotrienes, which are generally proinflammatory. The eicosanoids derived from EPA, such as the 3 series prostaglandins and hydroxyeicosapentaenoic acid ("HEPE"), are less inflammatory than those derived from AA. In addition, such eicosanoids may even have anti-inflammatory effects.

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As a class, the eicosanoids are short-lived and locally active. They are responsible for the initial events of inflammation, including vasodilation, increased vascular permeability, and chemotaxis. Moreover, the eicosanoids are instrumental in the early steps of the healing process. For example, the eicosanoids trigger the release of cytokines such as TGF-B, which in turn stimulates the migration and proliferation of connective tissue cells, and the deposition of extracellular matrix. Specific constitutive eicosanoids also have protective effects in the gastrointestinal mucosa and kidney, because they maintain glycosaminoglycan synthesis and normal perfusion of these organs.

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Because of anabolic processes such as these, and because of the influence of natural anti-catabolic and anti-oxidant agents in the body, the outcome of the majority of cases of inflammation is resolution of the injury and healing of the damaged tissues. Only in pathologic situations does inflammation itself become a contributor to disease.

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Research on the therapeutic use of eicosanoid precursor FAs (including cis-linoleic and alpha-linolenic acids, the so-called omega-3 and omega-6 fatty acids) has been primarily directed towards their use as competitive inhibitors of the synthesis of eicosanoids, and therefore, their anti-inflammatory effects. Except in cases of severe or absolute dietary deficiency, little attention has been given to the beneficial, anabolic

effects that the eicosanoids have in connective tissues. However, naturally occurring "subclinical" deficiencies of eicosanoids probably contribute significantly to disease, and are under diagnosed. For example, the enzyme delta-6-desaturase is responsible for the committed step in the synthesis of AA. Activity of this enzyme, (delta-6-desaturase) decreases with age. This is likely to prove a significant factor in the increased incidence of connective tissue dysfunction in older population segments since a deficiency of AA would decrease anabolic processes and allow catabolic events to dominate.

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Given the importance of inflammation in the healing of tissues, and the protective role that some eicosanoids play, it is not surprising that pharmaceuticals that decrease inflammation by blocking eicosanoid production should also have negative effects on healing and anabolic processes. It has long been known that corticosteroid drugs, which are strongly anti-inflammatory, also delay healing and decrease the production of extracellular matrix components. This is because cortisol and related compounds stabilize cell membranes and therefore inhibit the release of phospholipase A2, the precursor of AA. Recently attention has turned to the non-steroidal anti-inflammatory drugs ("NSAIDs"). Numerous studies have shown that NSAIDs, like corticosteroids, can decrease the synthesis of matrix components by connective tissue cells, because they inhibit prostaglandin endoperoxide synthase, and thus block the cyclooxygenase pathway.

Since the inflammatory process is the *sine qua non* of tissue healing, and since the eicosanoids are the mediators of the inflammatory process, the use of AA (and other eicosanoid compounds) is a novel approach to therapy of injured tissues. Kirkpatrick et al. investigated the use of prostanoid precursors on chick embryonic cartilage in organ culture and found no significant effects. [Kirkpatrick, C.J., "Effects of Prostanoid Precursors and Indomethacin on Chick Embryonic Cartilage Growth in Organ Culture," Expl. Cell Biol., 51:192-200 (1993)]. The experimental model in this work may have contributed to the absence of significant effects, because avian cartilage and embryonic cartilage differ significantly from mammalian, postnatal cartilage. For example, embryonic cartilage of any species is hypermetabolic and anabolic to begin with because it is in a period of exponential growth. Kent et al. examined the effects of AA in lapine cartilage and found a positive effect, although previous and subsequent research failed to confirm this. [Kent, L. et al., "Differential Response of Articular

Chondrocyte Populations to Thromboxane B2 and Analogs of Prostaglandin Cyclic Endoperoxidases," Prostaglandins, 19:391-406 (1980)]. Kirkpatrick and Gardner found that AA and various metabolites of AA had insignificant or inhibitory effects on biosynthesis. [Kirkpatrick C.J. and Gardner, D.L., "Influence of PGA1 on Cartilage Growth," Experientia, 33(4):504 (1976)]. Lippiello, et al. found, however, that AA and other omega-6 fatty acids had beneficial effects on chondrocyte metabolism in cell culture. [Lippiello, L., Ward, M., "Modification of articular cartilage chondrocyte metabolism by in vitro enrichment with fatty acids (abstract)," Trans. Orthop. Res. Soc. 13:162 (1988); Lippiello, L., "Prostaglandins and articular cartilage; does Prostaglandin perturbation perpetuate cartilage destruction?" Semin Arthritis Rheum 11:87 (1981).] These variable results are not unexpected, since the balance between anabolic and catabolic processes in the body is delicate and easily perturbed. Phan et al., suggest that products of AA via the cyclooxygenase pathway are anti-fibrogenic while AA products via the lipoxygenase pathway are pro-fibrogenic. This phenomenon demonstrates the complexity of the eicosanoids' interactions.

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Catabolic events are typically mediated in the body by enzymes that break apart body constituents. Catabolism is essential for health and deficiency of necessary enzymes results in disease, such as the so-called storage diseases like mucopolysaccharhidosis. Excessive catabolism may also result in the breakdown of tissues and lead to disease, as in degenerative diseases like osteoarthritis or autoimmune diseases like multiple sclerosis. Various anti-catabolic substances in the body help contain and balance catabolism. For example, chondroitin sulfate counteracts metalloproteinases that catabolize collagen and proteoglycans in the cartilage matrix. Similarly, alpha-one anti-trypsin inhibits the effects of elastase, which contributes to alveolar breakdown in emphysema.

Oxidative damage also has an impact on the balance of anabolism and catabolism in the body. This damage is the result of the effects of free radicals, substances that have an unpaired electron. Free radicals form constantly in the body as the result of normal reactions like the production of ATP. They also form during the inflammatory process. Free radicals cause cellular damage because they are highly chemically reactive. Because they have only a single electron, (a condition that nature abhors as it does a vacuum), these substances "steal" electrons from molecules in their

vicinity. The molecules making up cell structures, such as the cell membrane or DNA are thereby rendered electron-deficient. The deficiency of electrons in turn makes the cell structure unstable and cell dysfunction occurs, including manufacture of abnormal proteins, cell rupture, and cell death. Oxidative damage is implicated in many catabolic events in the body, including the aging process. Anti-oxidants, such as vitamin C, vitamin E, superoxide dismutase (SOD), selenium, and glutathione are substances that scavenge free radicals before oxidative damage occurs. In the sense that they prevent cell damage, anti-oxidants are a specific type of anti-catabolic agent.

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The body also contains anabolic compounds that stimulate tissue growth. Glucosamine is an amino sugar naturally formed in the body from glucose. When supplied exogenously, glucosamine stimulates connective tissue cell synthesis, and thereby increases the amounts of normal extracellular matrix. Glucosamine is also the building block for glycosaminoglycans in cartilage and other connective tissues. Supplying additional glucosamine thus supplies the body with extra raw materials for matrix synthesis in connective tissues. Other examples of anabolic compounds in the body include somatotropin, which stimulates protein synthesis, and the somatomedins or insulin-like growth factors, which stimulate the proliferation of chondrocytes and fibroblasts and enhance matrix synthesis.

The actions and interactions of these compounds are complex. A given compound may have different effects in different tissues. For example, somatotropin increases protein synthesis (anabolism), but also speeds fat breakdown (catabolism). The effects that a particular compound or combination of compounds will have depend on many factors, including route of administration, dosage, and duration of therapy.

Previous researchers have investigated the use of individual compounds for their anabolic, anti-oxidant or anti-catabolic effects. Glucosamine has been found in cell culture to stimulate connective tissue cells to produce the components of the matrix: collagen and glycosaminoglycans (GAGs). [Jimenez, S., "The Effects of Glucosamine sulfate on Chondrocyte Gene Expression," <u>Eular Symposium</u>, Madrid October 1996 Proceedings, page 8-10]. S-adenosylmethionine is known to participate in several synthesis reactions, including the sulfation of GAGs. [Champe, P. <u>Biochemistry</u>, 2nd edition, J.B. Lippincott Co, Philadelphia, 1994, pp. 248, 250, 265]. Arachadonic acid has been found to stimulate corneal healing. [Nakamura, M., "Arachidonic Acid Stimulates

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Corneal Epithelial Migration", <u>J. Ocul. Pharmacol.</u>, Summer: <u>10(2)</u>: 453-9 (1994)]. These compounds therefore have anabolic effects.

Chondroitin sulfate has been shown to inhibit degradative enzymes, including the metalloproteinases that destroy cartilage matrix. [Bartolucci, C., "Chondroprotective action of chondroitin sulfate," Int. J. Tiss. Reac., XIII(6):311-317 (1991)]. Studies with pentosan sulfate have shown that it prevents complementmediated damage in a rabbit myocardial cells. [Kilgore, K., "The Semisynthetic Polysaccharide Pentosan Polysulfate Prevents Complement-Mediated Myocardial Injury in the Rabbit Perfused Heart," J. Pharmocol. Exp. Ther., 285(3):987-94 (1998)]. Oral administration of collagen type II has been shown to decrease the deleterious immune response that destroys joint tissue in rheumatoid arthritis. Tetracycline analogues are potent inhibitors of matrix metalloproteinases. [Ryan, M., "Potential of Tetracyclines to Modify Cartilage Breakdown in Osteoarthritis." [Curr. Opin. Rheumatol., 8(3): 238-47 (1996)]. Diacerein modifies the inflammatory process by inhibiting interleukin-1 activity, and also by direct effects on lymphocytes and neutrophils. [Beccerica, E., "Diacetylrhein and rhein: in vivo and in vitro effect on lymphocyte membrane fluidity," Pharmocol. Res., 22(3):277-85 (1990); Mian, M., "Experimental Studies on Diacerhein: Effects on the Phagocytosis of Neutrophil Cells from Subcutaneous Carregeenan-Induced Exudate," Drugs Exp. Clin. Res., 13(11):695-8 (1987); Spencer, C., "Diacerein", Drugs, 53(1):98-106 (1997)]. These compounds can be classed as anti-catabolic agents.

L-ergothionine scavenges hydroxyl radicals and may inhibit singlet oxygen formation, [Han JS. "Effects of Various Chemical Compounds on Spontaneous and Hydrogen Peroxide Induced Reversion in Strain TA104 of *Salmonella typhimurium*," Mutant Res., 266(2):77-84 (1992)], while superoxide dismutase scavenges superoxide radicals [Mathews C., Biochemistry 2nd ed., Benjamin/Cummings Pub. Co., Menlo Park CA, 1996, page 551]. These compounds can be classified as anti-oxidants.

Although these compounds have been investigated individually, to our knowledge no one other than the present inventors has examined the effects of certain combinations of any or all of anabolic, anti-catabolic and anti-oxidant agents to maintain health and to promote healing. According to the present invention, combinations of these agents can be used to maximize appropriate anabolic effects (healing) and decrease undesirable catabolic effects (degradation) and oxidative damage, while at the same time,

causing minimal or no adverse reactions. Therefore, it can be seen that there exists a need to provide compositions that will make use of the beneficial effects of combinations of anabolic agents, anti-catabolic agents, anti-oxidant and/or analgesic agents for the maintenance and repair of connective tissues in humans and animals.

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Summary of the Invention:

The present invention provides novel compositions and methods of treating repairing, and preventing damage to connective tissues in humans and animals using such compositions. Therefore, it is an object of the invention to provide novel compositions of any or all of anabolic, anti-catabolic, anti-oxidant and/or analgesic agents for the protection, treatment and repair of connective tissues in humans and animals.

It is another object of the present invention to provide methods of treating and repairing connective tissue in humans and animals with compositions containing any or all of anabolic, anti-catabolic, anti-oxidant and/or analgesic agents.

It is still another object of the present invention to provide compositions any or all of anabolic, anti-catabolic, anti-oxidant and/or analgesic agents selected from the group consisting of aminosugar, S-adenosylmethionine (SAMe), arachadonic acid (AA), GAG, pentosan sulfate, collagen type II, tetracyclines, diacerin, super oxide dismutase (SOD), L-ergothionine, one or more avocado/soybean unsaponifiables (ASUs), hydroxyproline and analgesics, such as acetaminophen.

It is a further object of the present invention to provide compositions to repair, treat, and prevent damage to connective tissue in humans and animals that contain one or more of the elements selected from the group consisting of aminosugar, SAMe, arachidonic acid, GAG, pentosan sulfate, collagen type II, tetracyclines, diacerin, SOD, L-ergothionine, one or more ASUs, hydroxyproline and analgesics, e.g, acetaminophen.

These and other objects of the present invention are apparent from the detailed description and claims below.

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Brief Description of the Drawings

Figure 1 provides a detailed description of the biosynthetic pathway for the creation of GAGs such as chondroitin sulfate.

Figure 2 is the molecular structure of SAMe and its immediate precursor.

Figure 3 provides a simplified diagram of the function of SOD.

Figure 4 provides some examples of unsaponifiable lipids.

Figure 5 is the molecular structure of acetaminophen.

Detailed Description of the Invention:

The compositions of the present invention, used to treat, repair, and prevent damage to connective tissue, include combinations of anabolic, anti-catabolic, and/or anti-oxidant agents. Ingredients of preferred embodiments include compositions selected from the group consisting of aminosugars, SAMe, AA, GAGs, including pentosan, collagen type II, tetracyclines, diacerin, SOD, L-ergothionine, and one or more ASUs. Optionally, the combinations of the present invention also include one or more analgesics, such as acetaminophen. In addition, the present invention covers methods of administering these novel compositions to humans and animals in need thereof.

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Glucosamine – an example of an aminosugar – is naturally formed in the body from glucose. When supplied exogenously, glucosamine stimulates connective tissue cell synthesis, increasing the amounts of normal extracellular matrix. Glucosamine is also the building block for glycosaminoglycans ("GAGs") in cartilage and other connective tissues, thus, supplying additional glucosamine supplies the body with extra raw materials for matrix synthesis in connective tissues. The aminosugar component of the compositions of the present invention may comprise natural, synthetic or semi-synthetic aminosugars including but not limited to salts of glucosamine including glucosamine hydrochloride and glucosamine sulfate, glucosamine phosphate, and N-acetylglucosamine and salts and/or mixtures thereof. In addition, the term aminosugar is also used herein to encompass aminosugars that may have been chemically modified yet retain their function. Such chemical modifications include but are not limited to esterification, sulfation, polysulfation, acetylation, and methylation. Moreover, it is contemplated that the term

aminosugar can extend to any composition of matter that is insubstantially different from the aminosugar as above-described.

The GAG component of the compositions of the present invention may comprise natural, synthetic or semisynthetic GAGs, GAG-like compounds, or GAG precursors, including but not limited to chondroitin, hyaluronic acid, glucuronic acid, iduronic acid, keratan sulfate, heparan sulfate, dermatin sulfate, and fragments, salts, and mixtures thereof. In addition, the term GAG as used herein further encompasses GAGs that have been chemically altered yet retain their function. Such modifications include but are not limited to esterification, sulfation, polysulfation, and methylation. In fact, sulfated GAGs are a preferred component of the compositions of the present invention. Hence, mono-sulfated and polysulfated (or oversulfated) GAGs are preferred GAG components of the compositions of the present invention. The term GAGs also is intended to encompass alternative nomenclature for the same group of above-described compounds -- e.g., mucopolysaccharides, proteoglycans, and heparanoids. In addition, the GAG or GAG-like component of the compositions of the present invention may be derived from plant or animal sources, including but not limited to beechwood tree, to forms of animal cartilage including shark cartilage, bovine trachea, whale septum, and porcine nostrils, and to invertebrates such as Perna canaliculus and sea cucumber.

Chondroitin sulfate is a preferred GAG. Chondroitin sulfate is the most abundant glycosaminoglycan in articular cartilage and is also present in many other connective tissues in the body. Additionally, chondroitin sulfate competitively inhibits degradative enzymes that degrade connective tissues under conditions of abnormal, excessive inflammation. Chondroitin sulfate is a polymer composed of repeating units of glucuronic acid and sulfated galactosamine. [Lester M. Morrison, M.D. and O. Arne Schjeide, Ph.D., Coronary Heart Disease and the Mucopolysaccharides (Glycosaminoglycans) 12 (1974); Philip C. Champe and Richard A. Harvey, Lippincott's Illustrated Reviews: Biochemistry, 148-50 (2nd ed. 1994)]. One of ordinary skill in the art understands that chondroitin sulfate must have at least two, and potentially many, of these repeating units of glucuronic acid and sulfated galactosamine.

Figure 1 provides a detailed description of the biosynthetic pathway for the creation of GAGs, such as chondroitin sulfate. In addition, the present invention may include fragments of GAGs, such as fragments of chondroitin sulfate. One of ordinary

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skill in the art at the time the invention understands that "fragments of glycosaminoglycans" are groups of saccharides that constitute less than two repeating units of the glycosaminoglycan. Hence, it is understood that fragments of these substances would be composed of groups of saccharides that constitute fewer than two of the repeating units of the respective polymer.

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For example, one of ordinary skill in the art understands that fragments of chondroitin sulfate are molecules composed of the saccharides that comprise the repeating units of chondroitin sulfate, but that are present in groups of less than the two repeating units described above. Thus, a molecule composed of a glucuronic acid and sulfated galactosamine would constitute a fragment of chondroitin sulfate. Indeed, there are eight different disaccharide structures that may constitute fragments of chondroitin sulfate. [Timothy E. Hardingham and Amanda J. Fosang, <u>Proteoglycans: Many Forms</u> and Many Functions, FASEB J., 6:861-862 (1992)].

Other naturally occurring glycosaminoglycans may be used in this invention, for example, hyaluronic acid. Also, fragments of the glycosaminoglycans may also be utilized. A person of ordinary skill in the art understands the terms "fragments of chondroitin," "fragments of chondroitin sulfate," "fragments of chondroitin salts," "fragments of glycosaminoglycan" and "chondroitin sulfate fragments," and further understands them to mean groups of saccharides (or salts thereof) that constitute less than two repeating units of the glycosaminoglycan.

One of skill would expect that fragments of chondroitin sulfate, for example, would have the same utility as chondroitin sulfate itself. Chondroitin sulfate is broken down into smaller units within the body, and that it is reformulated in the production of cartilage and other connective tissue. Therefore, it is understood that the body utilizes fragments of chondroitin sulfate in the same manner as it utilizes chondroitin sulfate itself. The same is true with respect to "fragments of chondroitin," "fragments of chondroitin salts," and "fragments of glycosaminoglycan." Each of chondroitin, chondroitin salts and other glycosaminoglycans, if ingested, is broken down by the body and reformulated in the production of cartilage and other connective tissue. Therefore, the body utilizes fragments of chondroitin in the same manner as it utilizes chondroitin itself, utilizes fragments of chondroitin salts in the same manner as it utilizes

chondroitin salts, and utilizes fragments of glycosaminoglycans in the same manner as it utilizes glycosaminoglycans.

Moreover, it is intended that the term GAG can extend to any composition of matter that is insubstantially different from the GAGs as above-described. An example of such a GAG-like compound that is within the scope of the present invention is pentosan polysulfate (PPS) as well as salts thereof such as calcium-derived PPS and sodium PPS. Accordingly, a preferred GAG-like compound that may be used in the compositions of the present invention is PPS.

PPS is a semi-synthetic polysulfated xylan that is a sulfated form of a compound extracted from beechwood hemicellulose consisting of repeating units of (1-4) linked \(\beta\)-D-xylano-pyranoses. More specifically, PPS is produced by extracting these hemicellulose compounds via a series of chemical reactions from the wood, and then adding numerous sulfate groups to the purified polysaccharide chains. This process results in low molecular weight linear polysaccharide chains that carry numerous negatively charged sulfate groups. PPS is a semi-synthetic heparinoid that is considered an oversulfated form of a GAG.

There are several forms of PPS that display the above-described activities. Sodium PPS and a calcium-derived PPS (called CAPPS) may both be used to accomplish the functions of PPS. Each of these forms of PPS exhibit GAG-like activity, and will hereinafter be referred to as GAG-like compounds.

Pentosan's mechanism of action can be summarized as follows:

- Anti-inflammatory activities through stabilization and improvement of microcirculation in the inflamed tissues and through anti-Complement effects (decreases the release of the humoral mediators of inflammation called the Complement cascade).
- 2. Inhibition of chemotaxis of granulocytes, which are white blood cells that contribute to inflammation.
- 3. Stimulatory effect on proteoglycan synthesis.

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4. Stimulatory effects on hyaluronic acid synthesis by synovial fibroblasts.

5. Potent inhibition of catabolic enzymes including, human granulocyte elastase (noncompetitive inhibition), hyaluronidase (competitive inhibition), chondroitin-4-sulfatase and N-acetyl-glucosaminidase at concentrations much more lower than that of NSAIDs.

Other synthetic or semi-synthetic glycosaminoglycans or glycosaminoglycan-like compounds, such as polysulfated glycosaminoglycans, may be used in this invention.

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Diacerein also known as diacetylrhein, is a recently recognized organic compound found in plants of the genus *Cassia*. The active metabolite of diacerin, known as rhein, has anti-inflammatory effects through inhibition of interleukin-1B; consequently collagenase production in articular cartilage is reduced. It reduces the fibrinolytic activity of synovial fibroblasts as well. It also dose-dependently inhibits chemotaxis (attraction of white blood cells) and superoxide anion production (this is one of the "toxic oxygen species" or "free radicals"). These harmful compounds occur spontaneously in the body, especially during destructive inflammation. Diacerein (rhein) has analgesic and antipyretic activities. It reduces the breakdown of chondroitin-4-sulfate resulting in an increase in the ratio of chondroitin-4-sulfate to chondroitin-6-sulfate. (This ratio is pathologically decreased in degenerating cartilage.) Diacerein (rhein) mildly increases prostaglandin synthesis, which allows it to have protective effects on the gastric mucosa. As used in this application and claims, the term "diacerin" includes rhein.

S-adenosylmethionine (SAMe) is an important endogenous compound, present throughout the body, and taking part in a great number of biologic reactions such as transsulfation reactions. In this role it is an important reactant in the synthesis of many structural components of connective tissues, including proteins and proteoglycans. Thus, SAMe has significant anabolic effects which would enhance the actions of other anabolic agents. SAMe also has anti-inflammatory effects by virtue of its antioxidant action.

SAMe is compound synthesized in the body from adenosine triphosphate ("ATP") and methionine (Fig. 2). It is present in many tissues, including the central nervous system. The primary CNS function of SAMe is to donate methyl groups in the reactions synthesizing various crucial compounds, including neurotransmitters and phospholipids. For example, SAMe facilitates the conversion of

phosphatidylethanolamine to phosphatidylcholine, which forms part of the inner, lipid layer of the plasma membrane. In so doing, SAMe increases membrane fluidity and enhances effectiveness of receptor/ligand binding. [Champe and Harvey, Biochemistry, 1994; Stramentinoli, G., "Pharmacologic Aspects of S-Adenosylmethionine," American J. Med., 83(5A):35 (1987); Baldessarini, F., "Neuropharmacology of S-Adenosyl Methionine," American J. Med., 83(5A):95 (1987); Carney, M., "Neuropharmacology of S-Adenosyl Methionine," Clin. Neuropharmacol., 9(3):235 (1986); Janicak, P., "S-Adenosylmethionine in Depression," Alabama J. Med. Sci. 25(3):306 (1988)]. These functions may also pertain to other methyl donors such as betaine (trimethylglycine), 5methyltetrahydrofolate, folic acid, and dimethylglycine. [Champe and Harvey, Biochemistry, 1994]. Because SAMe takes part in a multitude of reactions, the need for SAMe in the body is always high, and disease states increase the demand. Deficiencies of SAMe are documented to exist in, and contribute to, various pathologic processes. SAMe is essential for the synthesis of sulfated glycosaminoglycans. Supplementation of SAMe would maximize the synthesis of glycosaminoglycans and prevent the ratelimiting effect that would be elicited by a deficiency of this vital compound.

SAMe is also active in reactions that preserve and support cell membranes. This effect is nowhere more important than in the liver. Each liver cell is essentially a system of membranes. Liver function depends on the maintenance of these membranes. For example, ethanol exerts its hepatotoxic effects, in part, by damaging liver cell membranes. Studies have repeatedly shown that supplementation of SAMe has protective effects in the face of ethanol toxicity. [Lieber, C. S., "Biochemical Factors in Alcoholic Liver Disease," Seminars in Liver Disease, 13:2, 1993, Theime Medical Publishers, Inc., New York, NY.]

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Superoxide dismutase is an enzyme present naturally in the tissues of animals and plants, which has recently been investigated as an agent in the management of inflammation. It acts by intercepting toxic oxygen radicals in the intracellular space during destructive inflammatory processes. It does not inhibit prostaglandin biosynthesis, but stops the overproduction of prostaglandins resulting from destructive inflammation. Some of its effects include inhibition of edema formation and inhibition of acute signs of inflammation and the secondary articular changes (stiffness and calcification) in adjuvant-induced arthritis. Having no analgesic effects, it does not

contribute to the overuse of the affected joints that eventually leads to more damage of the articular cartilage, as NSAIDs can. Also, it has no adverse effects on the cardiovascular, central nervous or endocrine systems. Figure 3 provides a simplified diagram of the function of SOD.

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L-ergothionine is an intracellular antioxidant naturally occurring in plants and animals, but not synthesized in human bodies: it comes only from dietary sources. The antioxidant properties of L-ergothionein appear to be related to its ability to scavenge reactive oxygen species (free radicals), chelate various metallic cations, activate antioxidant enzymes such as glutathione peroxidase (SeGPx) and manganese superoxide dismutase (Mn SOD) and to inhibit superoxide-generating enzymes such as NADPH-Cytochrome C reductase, and to affect the oxidation of various hemoproteins such as hemoglobin and myoglobin. Because all body tissues depend on these two oxygen carrier molecules, this characteristic is extremely beneficial. [Brummel, M.C., "In Search of a Physiological Function for L-ergothioneine," Med. Hypotheses, 18(4):351-70 (Dec. 1985); Brummel, M.C., "In Search of a Physiological Function for L-ergothioneine, --II," Med. Hypotheses, 30(1):39-48 (Sept. 1989); Han, J.S., "Effects of Various Chemical Compounds on Spontaneous and Hydrogen Peroxide-Induced Reversion in Strain TA104 of Salmonella typhimurium," Mutat. Res., 266(2):77-84 (April 1992); Arduini, A., "Possible Mechanism of Inhibition of Nitrite-Induced Oxidation of Oxyhemoglobin by Ergothioneine and Uric Acid," Arch. Biochem. Biophys., 294(2):398-402 (May 1992)].

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Collagen Type II also has beneficial effects that help maintain the normal balance between anabolism and catabolism. Specifically, connective tissue diseases may result from autoimmune processes, in which the immune system attacks and catabolizes the individual's own connective tissues as if it were a "foreign invader." Oral administration of collagen Type II can desensitize the immune system, preventing further attack and normalizing immune responses in these individuals. This decreases catabolic processes in the connective tissues and maximize anabolism. Ingestion of collagen type II presents this molecule to the immune cells in the gut-associated lymphoid tissues (GALT, a.k.a., Peyer's patches). Interactions between the collagen molecule and specific cells within the GALT activates mobile immune cells called T suppressor cells. These cells, in turn, moderate the destructive immune reaction against the individual's own collagen type II (in connective tissues).

Compounds in the tetracycline family include tetracycline, doxycycline, tetracycline analogs, and "tetracycline-like" compounds, and have been used therapeutically for their anti-microbial effects. Current research has focused on "tetracycline-like" compounds which possess insignificant antimicrobial effects, but with anti-catabolic effects. Specifically, "tetracycline-like" compounds are polycyclic compounds that inhibit tissue metalloproteinases which degrade extracellular matrix components including collagen and proteoglycans yet have insubstantial anti-microbial effects. This function of these compounds, as well as other compounds in the tetracycline family, may be related to the ability of these compounds to chelate calcium and zinc ions. For example, doxycycline has been shown to inhibit collagenase activity in articular cartilage.

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Certain lipid extracts, termed nonsaponifiable or unsaponifiable, which have been extracted from avocado (genus Persea, especially P. americana) and the soybean (Glycine max), and which could also be extracted from other plants, such as bananas, and organisms, such as algae, have also been studied for their beneficial effects on connective tissues. These nonsaponifiable or unsaponifiable compounds are that part of the plant lipids that do not undergo saponification, i.e., they do not react with alkali to form a soap. There are many such compounds, and any particular avocado extract may contain any number. Examples include fat soluble vitamins (A, D, E, and K), steroids such as phytoestrogens, sterols (bioflavonoids) and volatile essentials oils (terpenes such as menthol, camphor, lycopene, gibberellic acid, limonene, cinnamaldehyde, carotenoids, and ubiquinone, also known as coenzyme Q.) [Mathews, C. K. & van Holde, K. E. Biochemistry, 2nd ed., The Benjamin/Cummings Pub. Co., Inc., 1996, p. 691.]

The avocado/soybean unsaponifiables (ASU) have been used in Europe under the trade name Piascledine and have been used to treat osteoarthritis and other forms of arthritis [Thiers, M. H., "Unsaponifiable constituents of avocado and soya oils. Treatment of certain forms of arthralgia," J. Med. Lyon 53(222):195-8 (Feb. 1972) (article in French)], as well as soft-tissue inflammatory conditions [Trevoux, R., "Unsaponifiable fractions of the avocado and soybean in gynecology," J. Bynecol. Obstet. Biol. Reprod. 6(1):99-105 (Jan. 1977) (article in French); Lamaud, M. E., et al., "Biochemical modifications of connective tissue induced by the non-saponifiables of avocado and soy-bean oils administered percutaneously in the 'hairless' rat," Pathol.

Biol. 26(5):269-74 (May-Jun. 1978) (article in French)]. The mechanism of action of this compound is to stimulate chondrocyte expression of TGF (transforming growth factor) beta 1, TGF beta 2 and plasminogen activator inhibitor I ("PAI-1"). By increasing PAI-1, ASU blocks the cascade that leads to metalloprotease activation [Boumediene K., et al., "Avocado/soya unsaponifiables enhance the expression of transforming growth factor beta 1 and beta 2 in cultured articular chondrocytes," Arthritis Rheum. 42(1): 148-56 (Jan. 1999)]. ASU mixtures also reduce the spontaneous production of stromelysins, IL-6, IL-8 and prostaglandin E2 by chondrocytes. Additionally, ASUs decrease the effects of IL-1, and thereby reduce chondrocyte and synoviocyte production of collagenase. [Henrotin, Y. E., et al., "Effects of three avocado/soybean unsaponifiable mixtures on metalloproteinases, cytokines and prostaglandin E2 production by human articular chondrocytes," Clin. Rheumatol. 17(1): 31-9 (1998).]

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TGF beta 1 and 2 are members of a family of homologous polypeptidecytokines. These locally-acting hormones can have paracrine or autocrine effects and are made by a variety of cell types, including lymphocytes, endothelial cells and macrophages. TGF beta has varied effects in different tissues; it generally inhibits epithelial cell metabolism. In connective tissues, however, it has been shown to be an indirect mitogen for fibroblasts and other cells of mesenchymal origin. It also can stimulate cellular production of fibronectin and collagen, and decrease protease activity, resulting in a net increase in matrix production. [Cotran, R. F., Kumar, V. and Robbins, S. L., Eds., Pathologic Basis of Disease, 5th ed., Saunders, 1994, pp. 40-42.]

Stromelysins are a subtype of proteinases that act on a variety of extracellular matrix components, including proteoglycans, laminin, fibronectin, and collagen. Stromelysins are produced by fibroblasts, synoviocytes, and macrophages, among other cell types, under the influence of cytokines such interleukin –1 and tumor necrosis factor alpha. Interleukins and prostaglandins are among the many mediators of inflammation. Reductions in levels of all of these compounds result in a decrease in pain and swelling, which are hallmarks of inflammation.

The fat-soluble vitamins present in ASU mixtures are necessary for growth, and augment the anabolic effects of TGF-beta. Because they stimulate TGF beta and also decrease degradative enzymes, as explained above, ASU mixtures can be said to have both anabolic and anti-catabolic effects. Although some of the effects of ASUs

overlap the effects of other compounds in the present invention, ASUs contribute unique properties to the group of compounds and provide very beneficial effects when used in combination with those other compounds. For example, while glucosamine and ASUs both stimulate anabolic processes in connective tissue cells, these compounds have different cellular mechanisms of action. Glucosamine acts in part through protein kinase C, while the effect of ASUs, as stated above, is through transforming growth factor. Similarly, chondroitin and ASUs have inhibitory effects of IL-1. ASUs, however, inhibit the plasmin cascade, while chondroitin decreases activation of the complement cascade. Osteoarthritis is a complex disease involving interplay of many cytokines at the cellular level. Because the different compounds of the present invention act on different cytokines, they will have synergistic effects when used in appropriate combinations.

In placebo controlled, double blind trials, ASUs have been shown effective in reducing symptoms of osteoarthritis [Maheu, E., et al., "Symptomatic efficacy of avocado/soybean unsaponifiables in the treatment of osteoarthritis," Arthritis Rheum. 41(1): 81-91 (Jan. 1998); Blotman, F., et al., "Efficacy and safety of avocado/soybean unsaponifiables in the treatment of symptomatic osteoarthritis," Rev. Rheum. Engl. Ed. 64(12): 825-34 (Dec. 1997)]. In these studies, side effects in the intervention groups were similar to those seen in the placebo groups, indicating that ASUs are safe and well tolerated substances. Because the active unsaponifiable components found in avocados and soybeans may also be present in other plants and indeed other organisms, ASUs as used in this invention can include any or all unsaponifiable lipids and/or combinations thereof, regardless of origin, whether from plants or other organisms, or whether semi-synthetically or synthetically derived. Examples of components of ASUs include but are not limited to: limonene, beta carotene, phyloquinone, and giberellic acid. As explained above, ASUs can include any of a number of classes of compounds including but not limited to fat soluble vitamins, steroids, sterols and volatile essentials oils, or any combinations thereof. The invention includes, moreover, compositions which contain one avocado/soybean extract (ASU) or mixtures or combinations of such extracts (more than one ASU). There are many such combinations and all are intended to be included within the present invention.

Hydroxyproline is a compound that occurs normally in the vertebrate body as a necessary component of collagen formation. Like all proteins, collagen's primary

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structure (termed the pro-alpha-chain) contains a specific and characteristic sequence of amino acids. Specific for collagen is the presence of proline and lysine in certain locations in the chain. During the formation of collagen, these residues are hydroxylated by enzymes (prolylhydroxylase and lysylhydroxylase) to form hydroxyproline and hydroxylysine. The reducing agent ascorbic acid (Vitamin C) is also necessary for this hydroxylation to occur. Unless hydroxylation occurs, collagen molecules cannot assemble and cross-link, thereby severely limiting the strength of connective tissues. Recognized diseases of collagen formation that are caused by failure of hydroxylation include Ehlers-Danlos syndrome, scurvy, and osteogenesis imperfecta. In addition to the many known conditions caused by collagen abnormalities, it is likely that collagen abnormalities contribute to other diseases in ways that are not yet known.

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Proline is a precursor of hydroxyproline. The two molecules are structurally similar, differing only in the addition of a hydroxyl group. This small structural difference between the two molecules, however, has functional importance, in the same way that small structural differences in the shape of a key can have functional importance. Proline is a cyclic amino acid synthesized in the body from glutamate via several intermediary steps. Because it is normally synthesized in the body, proline is considered a non-essential amino acid. Collagen deficiencies due to the inability to synthesize proline and the resulting lack of proline in the body are poorly documented and are probably rare to non-existent, because a complete lack of proline would be inconsistent with life. As noted above, however, deficiencies of hydroxyproline are well known, and are usually due to the body's inability to hydroxylate proline. [Cotran, Kumar and Robbins, eds., Pathologic Basis of Disease, 1994, page 423.] In cases of hydroxyproline deficiency, therefore, proline supplementation is likely to be of no benefit. Instead, hudroxyproline should be supplemented or administered. It has been documented that many N-substituted derivatives of proline, including hydroxyproline, have anti-rheumatic and analgesic effects and also speed healing. [United States Patent No. 5,827,874.] The mechanism of action is not completely determined but it appears that inhibition of prostaglandins is not involved. [Ionac M., Parnham, M. J., Plauchithiu, M., Brune, K.; Pharmacol. Res. (Jun. 1996) 33:6 367-73.] In an autoradiography study, Kalbhen found that hydroxyproline (Oxaceprol®) increased the intracellular uptake of glucosamine in chicken cartilage. [Kalbhen, D. A., Kalkert,

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B., "Autoradiography studies of the effect of oxaceprol on the metabolism of joint cartilage and in vitro," Z Rheumatolo. (May-Jun 1987) 46:3 136-42.] This study indicates that a synergistic effect would exist if hydroxyproline and glucosamine were administered in combination. Indeed, synergistic effects would result from the combination of hydroxyproline with other ingredients in the present invention: for example, the combination of hydroxyproline with an anti-catabolic agent such as chondroitin sulfate. Hydroxyproline is classed in the present invention as an anabolic agent. Because supplementing hydroxyproline addresses collagen abnormalities and deficiencies that the other ingredients in the present invention do not address, and because hydroxyproline thereby contributes to the structure and function of connective tissue differently than the other ingredients, inclusing hydroxyproline in the compositions of the present invention is beneficial. Other forms and derivatives of hydroxyproline, including oligopeptides, acylated forms, nitrates, salts and other common derivatives, may be used in the present invention. Acetylated hydroxyproline is a preferred form of hydroxyproline for inclusion in the present invention.

The compounds of the present invention have several advantages over existing therapies for connective tissue disorders, such as excellent safety profiles. This is in part related to the fact that these compounds occur normally in the body and in various foods. Another characteristic shared by the compounds is tendency for a slow onset of action. Pharmaceuticals, such as NSAIDs, tend to cause sudden changes in the symptoms of disease. The endogenous compounds in the present invention work more slowly, by normalizing structures and functions within the body. While this action is beneficial, it does mean that symptoms will typically not be relieved immediately. For this reason, an analgesic is included as an optional component of the compositions of the present invention. The analgesic is to be chosen from the group of analgesic compounds that have been shown to have minimal side effects at therapeutic doses, and also to have minimal negative effects on connective tissue synthesis, as corticosteroid drugs and many NSAIDs have been shown to have. The analgesic that may be included in the composition of the present invention therefore is a nonsteroidal analgesic that does not have anti-inflammatory effects. In other words, the analgesic is a nonsteroidal drug that is not an NSAID. Examples of the analgesics of the present invention include

acetaminophen and tramadol. Except as discussed below, the preferred analgesic of the present invention is acetaminophen.

Acetaminophen is an analine derivative analgesic and antipyretic compound working centrally through reversible inhibition of the enzyme cyclooxygenase in the central nervous system. Acetaminophen also blocks the peripheral pain impulse generation in nerve endings throughout the body. It has been used extensively for symptomatic pain relief. The relief of pain is beneficial for more than the obvious humane reasons. Since there are also important links between the emotional centers of the brain and the immune system, the relief of pain, and the resulting elevation in mood, has beneficial effects on inflammation and the many other processes that are modulated by the immune system. For example, the decrease in pain associated with acetaminophen use can lead to decreased chemotaxis of neutrophils and decreased release of cytokines in the abnormal tissue. Decreased pain increases the willingness to move in normal ways, and this movement is itself generally beneficial for connective tissue healing. Although it blocks cyclooxygenase activity, acetaminophen has very little anti-inflammatory activity. Therefore, acetaminophen does not inhibit connective tissue anabolism, as NSAIDs and corticosteroids do, and because it has minimal side effects at therapeutic doses, it is an ideal analgesic agent in the present invention. Another advantage to including a safe analgesic in the present invention is that it will increase the likelihood that patient compliance would be high, i.e., that patients would continue taking the preparations long enough for disease-modifying effects to occur. Studies of isolated chondroprotective agents often have a high rate of drop-out in the early weeks of therapy due to patient perception that the agent is not working. With the addition of an analgesic, patients would be more inclined to continue therapy.

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Because acetaminophen and the other components of this invention have different mechanisms of action, their effects are synergistic and this enables the use of a lower dose of acetaminophen. Acetaminophen acts centrally and also peripherally through effects on substance P, blocking pain perception. Other ingredients in the invention act to reduce the cause of pain by enhancing the structure of connective tissues. Using a low dose of acetaminophen is desirable, because while the drug is useful for analgesia and does not have significant anti-inflammatory effects, it can have harmful effects on the liver and other tissues when large doses are used or the liver is otherwise compromised or

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diseased, such as by long-term alcohol abuse. It has been shown that with therapeutic levels of oral acetaminophen (less than 4 g/day), there was an increased metabolism of acetaminophen in chronically alcoholic patients, which would enhance the potential for liver toxicity. [Girre, C., Hispard, E., Palombo, S., et al., "Increased metabolism of acetaminophen in chronically alcoholic patients," Alcohol Clin. Exp. Res. (Feb. 1993) 17(1): 170-3.] Acetaminophen is the most widely used and recommended nonprescription analgesic and antipyretic medication in the United States. [Rose, S.R., "Subtleties of managing acetaminophen poisoning," Am. J. Hosp. Pharm. (Dec. 15, 1994) 51(24): 3065-8.] Because acetaminophen is widely advertised and readily available over the counter, consumers as well as health care professionals perceive this medication to be nontoxic. Either acute or chronic ingestion of excessive acetaminophen for pain relief can lead to hepatotoxicity (in both a dose-dependent and independent manner) more commonly than previously recognized, especially in those patients with predisposing liver conditions. [Barker, J. D. Jr., et al., "Chronic excessive acetaminophen use and liver damage," Ann. Inern. Med. (Sep. 1977) 87(3):299-301; Fry, S. W., Seeff, L. B., "Hepatotoxicity of analgesics and anti-inflammatory agents," Gastroenterol. Clin. North Am. (Dec. 1995) 24(4): 875-905; Lindgren, A., et al., "Paracetamol-inducted cholestatic and granulomatous liver injuries," J. Intern. Med. (May 1997) 241(5): 435-9.] Therefore, it is not obvious to a person of ordinary skill in the relevant art to use a low dose acetaminophen in combination with the other ingredients of the present invention. In the invention, low dose acetaminophen therapy would comprise administration of less than 2 grams of the drug daily. Moreover, some of the components of the present invention, notably SAMe, directly antagonize the harmful effects of acetaminophen by protecting liver function. It is also advantageous to combine glucosamine and chondroitin sulfate with acetaminophen because studies have shown that acetaminophen alone can lower blood sulfate levels and therefore decrease the synthesis of sulfated glycosaminoglycans in connective tissues. [Van der Kraan, P. M., Vitters, E. L., de Vries, B. J., et al, "The effect of chronic paracetamol administratio to rats on the glycosaminoglycan content of patellar cartilage," Agent Actions (March 1990); 29 (3-4): 218-223.] Administering acetaminophen alone for control of connective tissue pain may not be in the patient's best interest, but is commonly recommended currently. The use of acetaminophen in the

combinations of the present invention represents an unobvious improvement in therapy for patients with connective tissue abnormalites.

Cats are sensitive to acetaminophen because they do not metabolize it effectively (poor hepatic conjugation with glucuronic acid and subsequent depletion of glutathione occurs) [Goodman, A. and Goodman, L., <u>The Pharmacological Basis of Therapeutics</u>, 7th ed., MacMillan Publishing Co., 1985, pp. 692-95; Ahrens, F., <u>Pharmacology</u>, Williams & Wilkins, 1996, pp. 174-75]. Accordingly, acetaminophen is not recommended for use in cats.

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The present invention comprises novel combinations of anabolic agents, anti-catabolic agents and antioxidant agents that maximize beneficial, anabolic effects (healing) and minimize any potential negative effects. In so doing, the present invention provides novel combinations of these agents and anti-oxidant agents, for the protection, treatment and repair of connective tissues in humans and animals. The compounds included in the compositions of the present invention are not limited as to origin, and may be naturally, semi-synthetically or synthetically derived.

These compounds have a variety of beneficial effects on animal and human connective tissues, and, because they function via a variety of mechanisms, work well in combination with each other. Although each compound has a number of functions, they can be roughly grouped as: (1) anabolic agents, including glucosamine, SAMe, AA, ASUs, and hydroxyproline, which promote growth processes in the body; (2) anti-catabolic agents, such as chondroitin sulfate, pentosan sulfate, collagen type II, tetracyclines, diacerin and ASUs, which inhibit destructive or catabolic processes; and (3) antioxidants, such as SOD, and L-ergothionine which prevent tissue damage by scavenging toxic oxygen species (free radicals). Naturally, some compounds, such as ASUs, could be placed in more than one group, by virtue of their overlapping functions. The present invention establishes that combinations of these compounds would work well. In addition, an analgesic could optionally be added to any of the individual compounds recited above or to a combination of them to provide relief from pain. Acetaminophen is the analgesic of choice because it does not have powerful antiinflammatory effects and therefore does not interfere with healing of connective tissue. It also has minimal side effects at therapeutic doses, unlike NSAIDs which may cause gastrointestinal ulceration or poor renal perfusion even at therapeutic doses. Thus, the

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present invention consists of various combinations of two or more of the following agents: AA, glucosamine, chondroitin sulfate, pentosan, diacerin, S-adenosylmethionine, superoxide dismutase, L-ergothionein, collagen type II, tetracycline-like compounds, one or more ASUs, hydroxyproline, and, optionally, one or more analgesics, e.g.,

- 5 acetaminophen. Examples include, but are not limited to such combinations as: two anabolic agents (e.g., AA and glucosamine); an anabolic agent and an anti-catabolic agent (e.g., AA and pentosan); an anti-catabolic and an antioxidant (e.g., tetracyclicline and superoxide dismutase); or combinations of more than two agents (e.g., glucosamine, SAMe and AA) or SAMe, ASUs, hydroxyproline, acetaminophen and diacerin.
- Examples of specific compounds that may be present in ASU extracts include but are not 10 limited to: limonene, beta carotene, ubiquinone, and undecaprenol phosphate.

The following table shows possible combinations of pairs of the compounds discussed above. The letter "X" marks novel combinations of compounds that form the novel compositions of the present invention. The invention also includes combinations of three or more agents of the following compounds in the combinations shown on the table:

Glucosamine

Chondroitin

SAMe

20 Pentosan

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Superoxide Dismutase (SOD)

L-Ergothionine

Collagen Type II

Diacerin

25 Arachadonic Acid

Tetracycline like compounds

One or more avocado/soybean unsaponifiables.

Hydroxyproline

Analgesic, e.g., acetaminophen

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As explained above, examples of desired combinations are marked by X. For example, the first X in the first row means a combination of glucosamine and L-ergothionine or

glucosamine and diacerin. The compositions of the present invention additionally comprise any aggregation or addition of the combinations marked by X in any given row or column. For example, the compositions disclosed in the first row include combinations of glucosamine plus L-ergothionine plus diacerin, or glucosamine plus diacerin plus tetracycline-like compounds or glucosamine plus L-ergothionine plus diacerin plus AA plus tetracycline-like compounds, and so on. Examples of compositions disclosed in the column designated "Collagen Type II" would include combinations of collagen Type II plus SAMe plus pentosan, or collagen Type II plus SAMe plus pentosan plus superoxide dismutase plus L-ergothionine, and so on. Examples of compositions disclosed in the column designated "ASU" would include combinations of one or more ASUs plus glucosamine, or one or more ASUs plus SAMe plus pentosan, or one or more ASUs plus collagen Type II plus SAMe plus pentosan plus superoxide dismutase plus L-ergothionine, and so on. Similarly, the table shows that an analgesic, e.g., acetaminophen, can be combined with any other compound listed in the

table either singly or in any combination.

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	Super- scade Distinguise (SOE)	L-Ergothi-	Collagen Type 13	Discerto	Aracks- donic Acid	Yetracycline Elec compounds	ASU	Hydrety- proline	Analgesic, e.g., Accessmophen
Glacosassias		X		Х	×	X	X	X	X
Chandroisis		Х		Х	Х	х	Х	Х	X
SAMe	Х	Х	Х	Х	х	Х	X	X	X
Pentuan	х	х	Х	Х	X	X	х	X	X
Superatide Diagratuse SOD)		X	X	X	X	X	х	X	Х
L- Ergath lanise			X	X	Х	Х	X	Х	X
Collegen Type II				Х	Х	Х	Х	X	Х
Doscerta					X	X	X	X	Х
Arachadonic Acad						X	Х	Х	X
Terracycline like compareds			(X	X	Х
ASE								X	Х
Hydraiy- preime						·			X

The present inventors have investigated certain combinations of the above agents and have documented a novel response in several combinations. The effects of certain combinations of chondroitin sulfate, glucosamine, SAMe, arachidonic acid, collagen, pentosan, and superoxide dismutase were studied in cultures of adult bovine cartilage cells in different experiments (see example 2). Certain combinations had an inhibitory effect (hypometabolic) in this particular study. Both stimulatory and inhibitory novel interactions could be beneficial under various disease states. For example, a hypermetabolic state is part of the pathogenesis of some diseases. In such diseases, an inhibitory (hypometabolic) response would be beneficial to the individual. Future studies are planned to investigate the effects of a range of concentrations in the agents studied under various experimental models. Note that both increases and decreases in biosynthetic activity are novel interactions and could be beneficial to organisms under selected circumstances. For example, many researchers currently believe that

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osteoarthritis has a hypermetabolic component, especially in the early stages of pathogenesis. Researchers are divided as to whether treatment should focus on agents that stimulate cartilage matrix production, or agents that are inhibitory and therefore make the cartilage environment more hypometabolic, which in turn could have a stabilizing effect on the cartilage tissue.

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The compositions of the present invention may be administered via any route, including but not limited to intramuscularly, intravenously, orally, subcutaneously, rectally, topically, transcutaneously, intranasally, and intra-articularly, sublingually, intraperitoneally. Also, any salt of any of the present compounds may be used to aid in absorption, e.g., glucosamine HCl, glucosamine sulfate, glucosamine phosphate, sodium chondroitin sulfate, calcium chondroitin sulfate, potassium chondroitin sulfate, etc. In addition, the composition can be given in all common dosage forms including extended release dosage forms, pills, tablets, capsules, creams, liquids, aerosols, extended release forms, injectables, etc.

The dosage ranges of the compositions of the present invention will vary depending upon the needs of the human or animal to which the compositions are administered. The dosage ranges for the various components of the presently claimed compositions are as follows:

Compound	Daily Dose
Glucosamine	Total dose range: 25 mg to 12 g
	Small animal: 25 mg – 3 g.
	Human: 100 mg – 4 g
	Large animal: 300 mg - 12 g
Chondroitin sulfate	Total dose range: 15 mg – 12 g
	Small animal: 15 mg – 2 g
	Human: 75 mg – 4 g
	Large animal: 300 mg - 12 g · · · ·
SAMe	Total dose range: 10 mg – 8 g
	Small animal: 10 mg - 1 grassings -
	Human: 75 mg – 3 g in State Capanital and a state
	Large animal: 400 mg – 8 g
Pentosan	Total dose range: 3 mg to 3 g
	Small animal: 3 mg – 1 g
	Human: 50 mg – 2 g
	Large animal: 100 mg – 3 g see 12 and 12
Superoxide dismutase	Total dose range: 3 mg to 6 g (each mg containing > 3000
-	McCord – Fridovich units)
	Small animal 3 mg – 2 g
	Human: 5 mg – 3 g
	Large animal: 50 mg – 6 g
L-ergothioneine	Total dose range: 50 mg to 25 g
·	Small animal: 50 mg – 10 g
	Human: 50 mg – 15 g
	Large animal: 100 mg – 25 g
Collagen Type II	Total dose range: 0.1 mg to 10 g
	Small animal: 0.1 mg. – 10 g
	Human: 0.1 mg – 7.5 g
	Large animal: 1.0 mg. 10 g

Compound	Daily Dose			
Diacerin	Total dose range: 5 mg to 5 g			
	Small animal: 5 mg – 1 g			
	Human 20 mg – 3 g			
	Large animal: 50 mg – 5 g			
Arachadonic acid	Total dose range: 10 mg to 12 g			
	Small animal: 10 mg – 3 g			
	Human: 10 mg – 5 g			
	Large animal 50 mg - 12 g			
Tetracyclines	Total dose range: 1.0 mg to 2 g			
	Small animal: 1.0 mg – 1 g			
	Human: 2 mg – 1.5 g			
·	Large animal: 50 mg – 2 g			
Avocado/soybean	Total dose range: 5 mg to 5 gram			
unsaponifiables	Small animal: 5 mg to 1000 mg			
	Human: 50 mg to 1500 mg			
	Large animal: 100 mg to 5 grams			
	Or: 1 mg / kg to 25 mg / kg			
Hydroxyproline	Total dose range: 5 mg to 6 grams			
	Small animal: 5 mg to 1500 mg			
	Human: 50 mg to 3500 mg			
	Large animal: 50 mg to 6 grams			
Analgesic, e.g.,	Total dose range: 4 mg to 10 grams			
acetaminophen	Small animal (excluding cats): 4 mg to 1000 mg			
	Human: 100 mg to 4 gram			
	Large animal: 100 mg to 10 grams			

Doses are designed to cover the spectrum of body weights of small animals to large animals, with humans in the middle. The following examples are illustrative and do not in any way limit the present invention.

EXAMPLE 1

In our preliminary investigations, surgical instability was induced in the stifle joint of New Zealand white rabbits by modification of the Hulth technique. Post-operatively, animals were exercised for 1 hour daily. Experimental dietary formulas were evaluated for their cartilage stabilizing effect. The standard Harland (Teklad) rabbit diet (control); a standard diet also containing a 2% fungal oil containing 40% AA by weight (Arasco); and a standard diet containing also arachidonic acid and glucosamine/chondroitin were investigated. At 16 weeks, the medial femoral condyles of all rabbits were removed and cartilage degeneration quantitatively evaluated with a modified Mankin histological-histochemical grading system with safranin-O stained slides. Cartilage from all joints with surgical instability exhibited varying degrees of macroscopic degenerative lesions. Our preliminary results indicated that adding arachidonic acid to glucosamine/chondroitin sulfate has the potential to produce a novel interaction in cartilage. This novel interaction has the potential to have a cartilage modulating effect.

EXAMPLE 2

20 Procedure:

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Articular cartilage was resected from human or animal joints aseptically and placed into a large petri dish in a small amount of DMEM/F-12 or F-12. The tissue was diced to 1-2 mm dimensions and transferred to a small culture flask containing 20 mL DMEM or F-12 + 400 u/mL collagenase. The flask was placed on the shaker and incubated overnight.

The cell digest was repeatedly aspirated to increase release of cells. The cell digest was then placed into a 50 mL sterile centrifuge tube and centrifuged in the Beckman at 1000 RPM for 10 minutes. The medium was discarded by pipette and fresh DMEM/F-12 containing 1% FCS added. Depending on the size of the pellet, about 20-40 mL medium was added. Cell counts were determined by haemocytometer and the digest made up to a concentration of 100,000 cells/0.2 mL.

GAG Synthesis:

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To conduct GAG synthesis, 0.2 mL was aliquoted into each well of a 96 well plate using an 8 channel pipetter and the cells allowed to attach for 24 hours. The media was removed and 0.3 mL of fresh 1% FCS media added for 2 –3 days. On the day of the experiment, the media was removed and the experimental solutions containing 35-sulfate isotope were added. The incubation was continued for 4 hours. Termination: at the end of the incubation period, the labeling media was removed, the cell layer was rinsed repeatedly with cold 0.3 mL DMEM or F-12 (about 5x), and the cell layer was frozen for counting.

Counting of 96 Well Plates:

The cell layer for both the synthesis experiments were heated at 50 degrees after adding 100 ul 1 N NaOH for a period of 2 hours. 200 ul scintillant was added and the plates were placed in the counter. The data was expressed as CPM/100,000 cells.

Evaluation	Indv. Agents:		Agents	
Agent	CPM/	Sum	Combined	Difference
	100,000 cells	(CPM)	(CPM)	(CPM)
ChSO4-L	64			
AA	70	134	18	-116
ChS04-H	50	·		
AA	70	120	. 81	-39

Glu-H	117			
AA	70	187	16	-177
1%Sam	123			
10Paleos	86	209	62	-147

Evaluation	Indv. Agents:		Agents	
Agent	СРМ/		Combined	Difference
	100,000 cells	(CPM)	(CPM)	(CPM)
1%Sam	123			
1 Paleos	74	197	80	-117
3%Sam	42			
1Paleos	. 74	116	100	-16
	7.0			
3%Sam	42			
10Paleos	86	128	83	-45
3%Sam	42			
Collagen	118	160	90	-70
~				
3%Sam	42			
AA	70	112	104	-8
AA	70			
10Pentos	76	146	106	-40
Collagen	70	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
10Paleos	86	156	82	-74
		-		
Collagen	118			
10 Pentos	76	194	65	-129
			<u> </u>	
Collagen	118			
10 Paleos	86	204	77	-127

ChSO4 = Chondroitin

AA = Arachadonic Acid

SAMe = S-adenosylmethionine

5 Paleos = SOD

Collagen = Collagen

Pentos = Pentosan

H = High concentration

L= Low concentration

have a stabilizing effect on the cartilage tissue.

In this model, at the concentrations studied, the representative combinations had an inhibitory (hypometabolic) effect in this particular study. This hypometabolic effect could be beneficial under various disease states, indeed both stimulatory and inhibitory novel interactions could be beneficial under various disease states. For example, a hypermetabolic state is part of the pathogenesis of some diseases. In such diseases, an inhibitory (hypometabolic) response would be beneficial to the individual. Future studies are planned to investigate the effects of a range of concentrations in the agents studied under various experimental models. Note that both increases and decreases in biosynthetic activity are novel interactions and could be beneficial to organisms under selected circumstances. For example, many researchers currently believe that osteoarthritis has a hypermetabolic component, especially in the early stages of pathogenesis. Researchers are divided as to whether treatment should focus on agents that stimulate cartilage matrix production, or agents that are inhibitory and therefore make the cartilage environment more hypometabolic, which in turn could

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EXAMPLE 3

A 4 year old child has juvenile rheumatoid arthritis in which the immune system inappropriately targets endogenous connective tissues with antibodies against native collagen type II. The resulting inflammation and degradation of cartilage causes pain and dysfunction in the synovial joints. Present treatments include corticosteroids which non-selectively suppress the immune system, thus leaving the body vulnerable to

infectious disease, or methotrexate, which inhibits DNA synthesis, repair, and cellular replication, thus affecting not only the immune system but also intestinal mucosa, and the bone marrow. This child is given 2 mg of collagen type II daily, and SOD 10 mg daily. The collagen decreases the inappropriate immune attack, and the SOD inactivates destructive free radicals that damage cells. By preventing cellular damage, the SOD helps maximize the normal function of joint tissue cells. This combination has no harmful side effects at therapeutic doses and is a beneficial addition to existing therapies for rheumatoid arthritis.

10 EXAMPLE 4

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A 6 year old thoroughbred race horse has neutrophilic inflammation of the carpus. In this condition, trauma to the tissues of the joint injures cells and therefore results in liberation of cytokines which attract large numbers of neutrophils into the synovial space. This response is beneficial in cases of sepsis, but in non-septic conditions the neutrophils provide no useful service to the animal. Indeed, because neutrophils produce various degradative compounds, including superoxide molecules, their presence in the joint contributes to a vicious cycle of inflammation, tissue damage, and increased inflammation. Currently this condition is treated with nonsteroidal antiinflammatory drugs, which suppress prostaglandin synthesis and therefore have many side effects. This horse is given a mixture of diacerin 100 mg, pentosan 200 mg and SAMe, 1000 mg The diacerin and pentosan both inhibit chemotaxis (the attraction of white blood cells into the affected area) and thus reduce the numbers of neutrophils in the joint. Additionally, pentosan stimulates the synthesis of synovial fluid and thus supports normal function of the joint. Diacerin inhibits superoxide production; since superoxide production is one of the mechanisms through which neutrophils have their harmful effects, this action of diacerin is obviously beneficial. SAMe supports the structure and function of cell membranes, and therefore helps repair injured joint tissue cells thus blocking the events that start the harmful inflammation. This combination has no harmful side effects at therapeutic doses and is a great improvement over existing therapies.

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EXAMPLE 5

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A 47 year-old woman has severe knee osteoarthritis. Currently she requires large doses of NSAIDs to control her symptoms. Although her orthopedic surgeon has recommended taking glucosamine/chondroitin sulfate, she has been reluctant to do so because these compounds are extracted from animal tissues and the patient is a strict vegetarian. Instead she takes diacerein 25 mg and ASU 250 mg, and 500 mg of acetaminophen daily. The diacerin inhibits chemotaxis and thereby reduces inflammation in the knee joint. The ASU increases TGF beta 1 and 2, stimulating repair of damaged joint tissues. The acetaminophen causes rapid analgesia, reducing the patient's symptoms without adversely affecting cartilage metabolism and without risk of gastrointestinal ulceration. As a result of the reduction in pain, the patient decides to add a 15 minute walk to her daily schedule. The controlled exercise further improves her physical and mental state.

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EXAMPLE 6

A 5 year old Jersey dairy cow is diagnosed with severe osteoarthritis following an episode of fever and synovitis attributed to Lyme disease. This animal is the source of the owner's family milk supply and the owner wishes to treat the lameness with compounds that are "natural," i.e., compounds that normally occur in plants and animal bodies, rather than pursuing more traditional solutions such as 1) culling the animal 2) using non-steroidal anti-inflammatory drugs or 3) using steroids. The animal is treated with ASU 900 mg, SAMe 600 mg and glucosamine 500 mg daily. This approach is an improvement over existing options for several reasons. Because the compounds are natural components of plants and animal bodies with documented wide margins of safety, there is less concern over metabolites secreted in the milk. Because the compounds are available orally, and are active in small amounts, they are easy to administer to the animal in feed. The combined effect of the three compounds is to reduce inflammation and pain, to support normal function, and to stimulate healing of connective tissues.

EXAMPLE 7

A 43 yr old nurse with hepatitis B also suffers from osteoarthritis. Due to his liver problem, his use of pharmaceutical analgesics with potential hepatotoxicity is a matter of concern. He is given acetaminophen 500 mg daily, which is a low dose for that analgesic, in combination with 800 mg daily of glucosamine, 800 mg daily of chondroitin sulfate and 900 mg daily of SAMe. These compounds work together to decrease pain, support normal joint tissues and maximize liver function.

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EXAMPLE 8

A 53 year old man has severe arthritis of his lower back. He currently takes large doses of NSAIDs but suffers from stomach pains and is worried about gastric ulceration. He has tried to substitute glucosamine and chondroitin sulfate for the NSAIDs but did not stay on the therapy because his back pain was too severe without analgesia. He is given hydroxyproline 500 mg daily, acetaminophen 500 mg daily, SOD 600 mg daily and arachidonic acid 300 mg daily.

The acetaminophen controls his pain without gastric upset, the hydroxyproline and arachidonic acid stimulate anabolic processes (but via different mechanisms of action) in the vertebral joints, and the SOD scavenges free radicals thereby decreasing harmful inflammation.

Based on the teaching of the present invention, one of skill in the art would understand that combinations of the compounds taught by the present invention would act synergistically. For example, it is understood that glucosamine has stimulatory effects on chondrocyte metabolism which, by itself, aids in ameliorating diseases of cartilage degradation. However, an increase in cell metabolism can also produce an increase in free-radical production, as a natural by-product of oxidative phosphorylation. The increase in free radical production would dilute the beneficial effects of the glucosamine administration. By combining L-ergothioneine with glucosamine, one would expect an increase in metabolism and a reduction in free-radical damage, providing for a greater benefit than if compounds leading to one of these effects were provided. Therefore, one of skill in the art, based on the teaching of the present

invention, would understand that combining glucosamine with L-ergothioneine would be more beneficial than providing either alone. The synergy that exists between certain compounds in the present invention also enables the use of lower doses of each compound. Although these compounds are quite safe, there may be a potential for side effects. For example, large doses of glucosamine sulfate or chondroitin sulfate can cause gastrointestinal disturbances in some individuals. In addition, these compounds are costly; for these reasons, the ability to minimize the dose and still achieve beneficial effects is desirable.

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Many modifications may be made without departing from the basic spirit of the present invention. Accordingly, it will be appreciated by those skilled in the art that within the scope of the appended claims, the invention may be practiced other than has been specifically described herein. Hence, the attached claims are intended to cover the invention embodied in the claims and substantial equivalents thereto.

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WE CLAIM:

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1. A composition for the treatment, repair or prevention of damage to connective tissue comprising one or more avocado/soybean unsaponifiables and one or more compounds selected from the group consisting of aminosugars, GAGs, GAG-like compounds, pentosan, SAMe, SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such avocado/soybean unsaponifiable and each such compound may be naturally, semisynthetically or synthetically derived.

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A composition for the treatment, repair or prevention of damage to connective tissue comprising hydroxyproline, including its salts or derivatives, and one or more compounds selected from the group consisting of aminosugars, GAGs, GAG-like compounds, pentosan, SAMe, SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, tetracycline-like compounds, and one or more ASUs, wherein each such hydroxyproline, salt and derivative thereof and each such compound may be naturally, semi-synthetically or synthetically derived.

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3. A composition for the treatment, repair or prevention of damage to connective tissue comprising a non-steroid, non-NSAID analgesic and one or more compounds selected from the group consisting of aminosugars, GAGs, GAG-like compounds, pentosan, SAMe, SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, tetracycline-like compounds, one or more ASUs and hydroxyproline, including its salts or derivatives, wherein each such analgesic and each such compound may be naturally, semi-synthetically or synthetically derived.

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4. The composition of claim 3 in which the analgesic is selected from the group consisting of acetaminophen and tramadol.

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> 5. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 1 to a human or animal in need thereof.

- 5 6. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 2 to a human or animal in need thereof.
 - 7. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 3 to a human or animal in need thereof.
 - 8. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 4 according to a protocol wherein the dose of acetominophen is reduced to the minimum level necessary to control connective tissue pain.
 - 9. A composition for the treatment, repair or prevention of damage to connective tissue comprising one or more aminosugars and one or more compounds selected from the group consisting of L-ergothionine, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such aminosugar and each such compound may be naturally, semi-synthetically or synthetically derived.
- 10. A composition for the treatment, repair or prevention of damage to 25 connective tissue comprising one or more GAGs and one or more compounds selected from the group consisting of L-ergothionine, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such GAG and each such compound may be naturally, semi-synthetically or 30 synthetically derived.

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11. A composition for the treatment, repair or prevention of damage to connective tissue comprising SAMe and one or more compounds selected from the group consisting of SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein said SAMe and each such compound may be naturally, semi-synthetically or synthetically derived.

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A composition for the treatment, repair or prevention of damage to connective tissue comprising pentosan and one or more compounds selected from the group consisting of SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such pentosan and each such compound may be naturally, semisynthetically or synthetically derived.

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A composition for the treatment, repair or prevention of damage to connective tissue comprising a GAG-like compound and one or more compounds selected from the group consisting of SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such GAG-like compound and each such other compound may be naturally, semi-synthetically or synthetically derived.

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14. A composition for the treatment, repair or prevention of damage to connective tissue comprising SOD and one or more compounds selected from the group consisting of L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein said SOD and each such compound may be naturally, semi-synthetically or synthetically derived.

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15. A composition for the treatment, repair or prevention of damage to connective tissue comprising L-ergothionine and one or more compounds selected from the group consisting of collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein said L-

ergothionine and each such compound may be naturally, semisynthetically or synthetically derived.

16. A composition for the treatment, repair or prevention of damage to connective tissue comprising collagen type II and one or more compounds selected from the group consisting of diacerin, arachadonic acid, and tetracycline-like compounds, wherein said collagen type II and each such compound may be naturally, semi-synthetically or synthetically derived.

17. A composition for the treatment, repair or prevention of damage to connective tissue comprising diacerin and one or more compounds selected from the group consisting of arachadonic acid, and tetracycline-like compounds, wherein each such diacerin and each such compound may be naturally, semi-synthetically or synthetically derived.

18. A composition for the treatment, repair or prevention of damage to connective tissue comprising arachadonic acid and tetracycline-like compounds, wherein said arachadonic acid and tetracycline-like compounds may be naturally, semi-synthetically or synthetically derived.

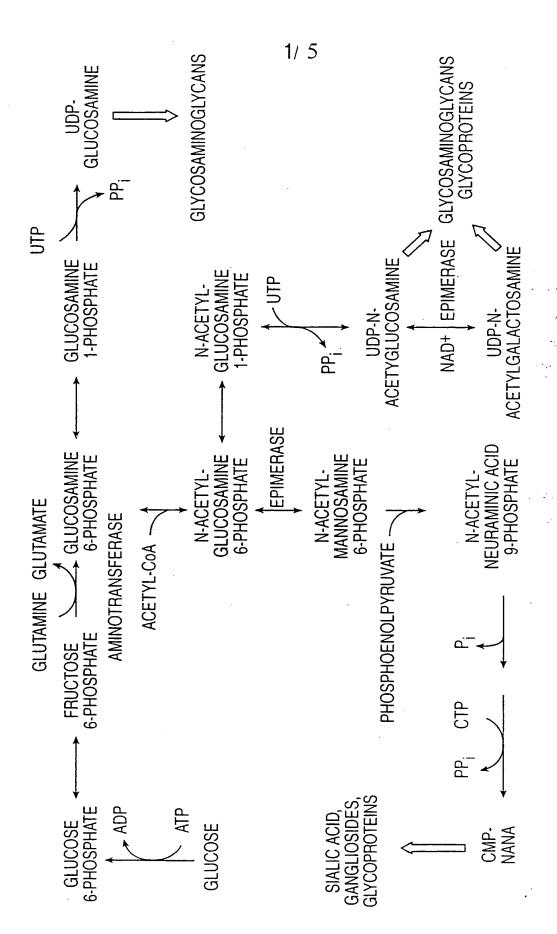
19. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering the compositions of any one of claims 9-18 to a human or animal in need thereof.

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THE SYNTHESIS OF GLYCOSAMINOGLYCANS FROM GLUCOSAMINE

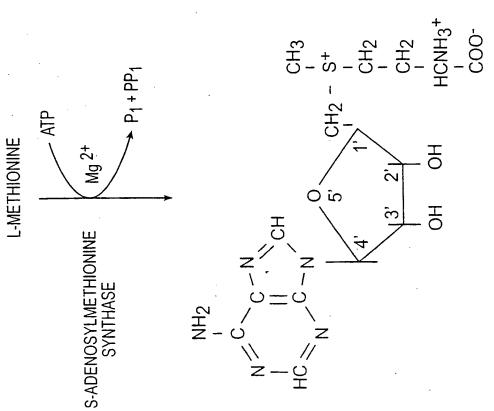
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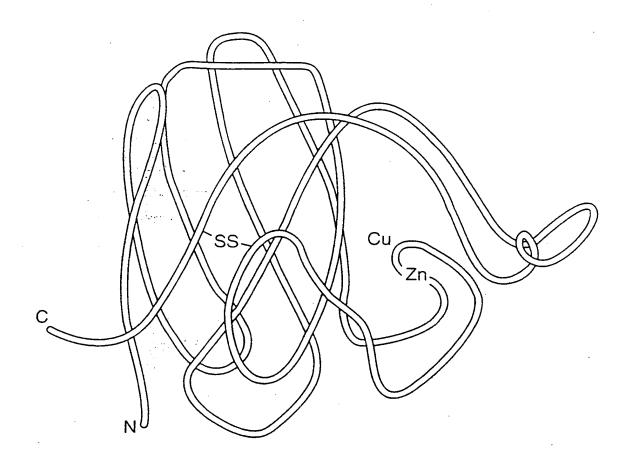
THE SYNTHESIS OF S-ADENOSYLMETHIONINE

FIG. 2

S-ADENOSYLMETHIONINE



'2 |2 |H3+



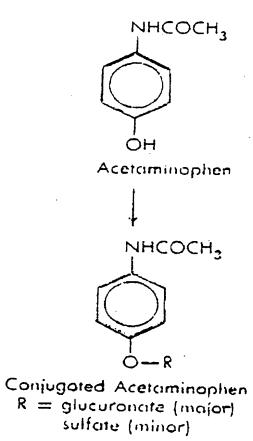
SIMPLIFIED DIAGRAM OF THE THREE-DIMENSIONAL STRUCTURE OF A SUBUNIT OF BOVINE SUPEROXIDE DISMUTASE

FIG. 3

Phylloquinone

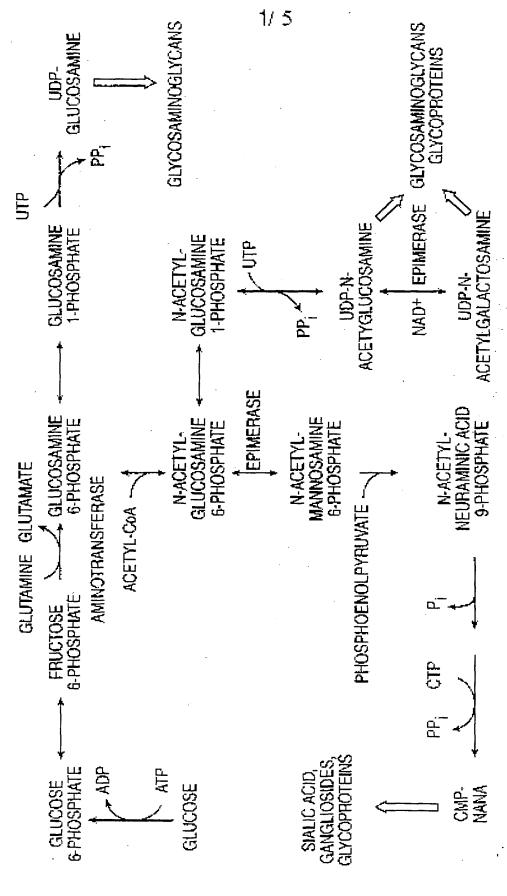
Examples of unsaponifiable lipids

FIGURE 4



Acetaminophen and its conjugate

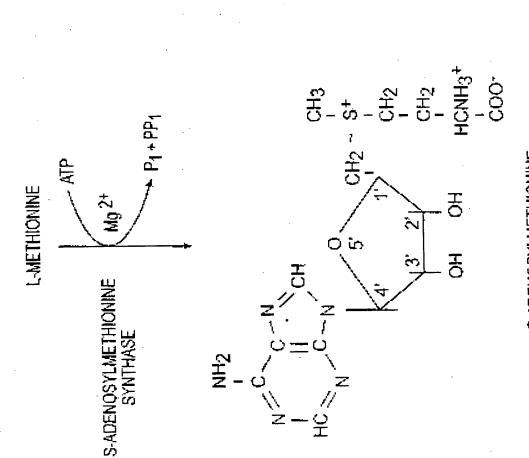
FIGURE 5



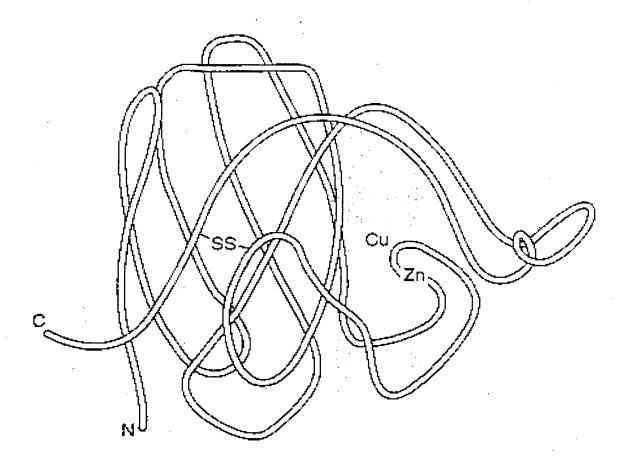
THE SYNTHESIS OF GLYCOSAMINOGLYCANS FROM GLUCOSAMINE

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FIG 2



THE SYNTHESIS OF S-ADENOSYLMETHIOMINE



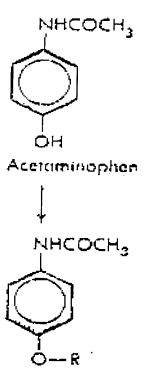
SIMPLIFIED DIAGRAM OF THE THREE-DIMENSIONAL STRUCTURE OF A SUBUNIT OF BOVINE SUPEROXIDE DISMUTASE

FIG. 3

a-Toeopheroi (vitamin E)

Phylloquinone

Examples of unsaponifiable lipids



Conjugated Acetaminophen

R = glucuronate (major)

sulfate (minor)

Acetaminophen and its conjugate

FIGURE 5



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(57) Abstract

The present invention relates to compositions for the protection, treatment and repair of connective tissues in humans and animals comprising any or all of anabolic, anti-catabolic, anti-oxidant and analgesic agents, including aminosugars, S-adenosylmethionine, arachadonic acid, GAGs, including pentosan, collagen type II, tetracyclines or tetracycline-like compounds, diacerin, super oxide dismutase, L-ergothionine, one or more avocado/soybean unsaponifiables, hydroxyproline and an analgesic, e.g., acetaminophen, and to methods of treating humans and animals by administration of these novel compositions to humans and animals in need thereof.

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INTERNATIONAL SEARCH REPORT

International application No. PCT/US99/12152

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0.5.	314/023, 300, 23, 134, 336, 424 , 424/346, 193.1	•					
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A,r	WO 98/48816 A1 (NUTRAMAX LABRATORIES, INC.) 05 NOVEMBER 1998, see entire abstract	1-19					
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(54) Title: AGENTS AND METHODS FOR PROTECTION, TREATMENT AND REPAIR OF CONNECTIVE TISSUE

(57) Abstract

The present invention relates to compositions for the protection, treatment and repair of connective tissues in humans and animals comprising any or all of anabolic, anti-catabolic, anti-oxidant and analgesic agents, including aminosugars, S-adenosylmethionine, arachadonic acid, GAGs, including pentosan, collagen type II, tetracyclines or tetracycline-like compounds, diacerin, super oxide dismutase, L-ergothionine, one or more avocado/soybean unsaponifiables, hydroxyproline and an analgesic, e.g., acetaminophen, and to methods of treating humans and animals by administration of these novel compositions to humans and animals in need thereof.

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AGENTS AND METHODS FOR PROTECTION, TREATMENT AND REPAIR OF CONNECTIVE TISSUE

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Field of the Invention:

The present invention relates to compositions for the protection, treatment and repair of connective tissues in humans and other animals.

Background of the Invention:

The tissues of mammals, including humans, are in a constant state of flux between the anabolic processes that build up tissues, and the catabolic processes which degrade tissues. The state of health exists when there is a balance between these two processes, and derangements of the balance produce disease. This holds true for all tissues of the body. Connective tissues are of particular importance for several reasons. First, they support the "functional cells" of the body, i.e., epithelial, muscle and neural cells. Second, they play critical roles in intercellular communication, which is essential for multicellular life.

The inflammatory process occupies a key position in this balance. When injury to tissues occurs, inflammation initiates the biochemical processes that result in tissue repair. Because inflammation results in the symptoms of pain, inflammation, and swelling of the tissues involved, it is often regarded by both patients and physicians as an abnormal and undesirable state, which should be treated and relieved as soon and as completely as possible. As a result, pharmacies are full of "anti-inflammatory drugs" (such as corticosteroids and the non-steroidal anti-inflammatory drugs, such as aspirin). Under certain circumstances, inflammation can indeed be destructive; however, it is important to remember that inflammation is closely linked with tissue healing. Indeed, inflammation is not easily categorized as strictly anabolic or catabolic -- it may have either effect. Its purpose in the body is to remove, dilute or wall-off the injurious

agent(s). It also sets into motion the biochemical processes that repair and reconstruct the damaged tissue. Because it is essential to healing, and because it can also cause tissue destruction, inflammation and its mediators are important factors in the anabolic and catabolic balance.

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One very important class of inflammatory mediators is the eicosanoid group. The eicosanoids are synthesized in the body from essential fatty acids ("FAs"). Through a series of biochemical reactions, the precursor fatty acids are modified to produce intermediate metabolites, arachadonic acid ("AA"), an omega-6 FA; and eicosapentanoic acid ("EPA"), an omega-3 FA. Eicosanoids produced from arachidonic acid include the 2-series of prostaglandins and the 4-series of leukotrienes, which are generally proinflammatory. The eicosanoids derived from EPA, such as the 3 series prostaglandins and hydroxyeicosapentaenoic acid ("HEPE"), are less inflammatory than those derived from AA. In addition, such eicosanoids may even have anti-inflammatory effects.

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As a class, the eicosanoids are short-lived and locally active. They are responsible for the initial events of inflammation, including vasodilation, increased vascular permeability, and chemotaxis. Moreover, the eicosanoids are instrumental in the early steps of the healing process. For example, the eicosanoids trigger the release of cytokines such as TGF-B, which in turn stimulates the migration and proliferation of connective tissue cells, and the deposition of extracellular matrix. Specific constitutive eicosanoids also have protective effects in the gastrointestinal mucosa and kidney, because they maintain glycosaminoglycan synthesis and normal perfusion of these organs.

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Because of anabolic processes such as these, and because of the influence of natural anti-catabolic and anti-oxidant agents in the body, the outcome of the majority of cases of inflammation is resolution of the injury and healing of the damaged tissues. Only in pathologic situations does inflammation itself become a contributor to disease.

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Research on the therapeutic use of eicosanoid precursor FAs (including cis-linoleic and alpha-linolenic acids, the so-called omega-3 and omega-6 fatty acids) has been primarily directed towards their use as competitive inhibitors of the synthesis of eicosanoids, and therefore, their anti-inflammatory effects. Except in cases of severe or absolute dietary deficiency, little attention has been given to the beneficial, anabolic

effects that the eicosanoids have in connective tissues. However, naturally occurring "subclinical" deficiencies of eicosanoids probably contribute significantly to disease, and are under diagnosed. For example, the enzyme delta-6-desaturase is responsible for the committed step in the synthesis of AA. Activity of this enzyme, (delta-6-desaturase) decreases with age. This is likely to prove a significant factor in the increased incidence of connective tissue dysfunction in older population segments since a deficiency of AA would decrease anabolic processes and allow catabolic events to dominate.

Given the importance of inflammation in the healing of tissues, and the protective role that some eicosanoids play, it is not surprising that pharmaceuticals that decrease inflammation by blocking eicosanoid production should also have negative effects on healing and anabolic processes. It has long been known that corticosteroid drugs, which are strongly anti-inflammatory, also delay healing and decrease the production of extracellular matrix components. This is because cortisol and related compounds stabilize cell membranes and therefore inhibit the release of phospholipase A2, the precursor of AA. Recently attention has turned to the non-steroidal anti-inflammatory drugs ("NSAIDs"). Numerous studies have shown that NSAIDs, like corticosteroids, can decrease the synthesis of matrix components by connective tissue cells, because they inhibit prostaglandin endoperoxide synthase, and thus block the cyclooxygenase pathway.

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Since the inflammatory process is the *sine qua non* of tissue healing, and since the eicosanoids are the mediators of the inflammatory process, the use of AA (and other eicosanoid compounds) is a novel approach to therapy of injured tissues. Kirkpatrick et al. investigated the use of prostanoid precursors on chick embryonic cartilage in organ culture and found no significant effects. [Kirkpatrick, C.J., "Effects of Prostanoid Precursors and Indomethacin on Chick Embryonic Cartilage Growth in Organ Culture," Expl. Cell Biol., 51:192-200 (1993)]. The experimental model in this work may have contributed to the absence of significant effects, because avian cartilage and embryonic cartilage differ significantly from mammalian, postnatal cartilage. For example, embryonic cartilage of any species is hypermetabolic and anabolic to begin with because it is in a period of exponential growth. Kent et al. examined the effects of AA in lapine cartilage and found a positive effect, although previous and subsequent research failed to confirm this. [Kent, L. et al., "Differential Response of Articular

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Chondrocyte Populations to Thromboxane B2 and Analogs of Prostaglandin Cyclic Endoperoxidases," Prostaglandins, 19:391-406 (1980)]. Kirkpatrick and Gardner found that AA and various metabolites of AA had insignificant or inhibitory effects on biosynthesis. [Kirkpatrick C.J. and Gardner, D.L., "Influence of PGA1 on Cartilage Growth," Experientia, 33(4):504 (1976)]. Lippiello, et al. found, however, that AA and other omega-6 fatty acids had beneficial effects on chondrocyte metabolism in cell culture. [Lippiello, L., Ward, M., "Modification of articular cartilage chondrocyte metabolism by in vitro enrichment with fatty acids (abstract)," Trans. Orthop. Res. Soc. 13:162 (1988); Lippiello, L., "Prostaglandins and articular cartilage; does Prostaglandin perturbation perpetuate cartilage destruction?" Semin Arthritis Rheum 11:87 (1981).] These variable results are not unexpected, since the balance between anabolic and catabolic processes in the body is delicate and easily perturbed. Phan et al., suggest that products of AA via the cyclooxygenase pathway are anti-fibrogenic while AA products via the lipoxygenase pathway are pro-fibrogenic. This phenomenon demonstrates the complexity of the eicosanoids' interactions.

Catabolic events are typically mediated in the body by enzymes that break apart body constituents. Catabolism is essential for health and deficiency of necessary enzymes results in disease, such as the so-called storage diseases like mucopolysaccharhidosis. Excessive catabolism may also result in the breakdown of tissues and lead to disease, as in degenerative diseases like osteoarthritis or autoimmune diseases like multiple sclerosis. Various anti-catabolic substances in the body help contain and balance catabolism. For example, chondroitin sulfate counteracts metalloproteinases that catabolize collagen and proteoglycans in the cartilage matrix. Similarly, alpha-one anti-trypsin inhibits the effects of elastase, which contributes to alveolar breakdown in emphysema.

Oxidative damage also has an impact on the balance of anabolism and catabolism in the body. This damage is the result of the effects of free radicals, substances that have an unpaired electron. Free radicals form constantly in the body as the result of normal reactions like the production of ATP. They also form during the inflammatory process. Free radicals cause cellular damage because they are highly chemically reactive. Because they have only a single electron, (a condition that nature abhors as it does a vacuum), these substances "steal" electrons from molecules in their

vicinity. The molecules making up cell structures, such as the cell membrane or DNA are thereby rendered electron-deficient. The deficiency of electrons in turn makes the cell structure unstable and cell dysfunction occurs, including manufacture of abnormal proteins, cell rupture, and cell death. Oxidative damage is implicated in many catabolic events in the body, including the aging process. Anti-oxidants, such as vitamin C, vitamin E, superoxide dismutase (SOD), selenium, and glutathione are substances that scavenge free radicals before oxidative damage occurs. In the sense that they prevent cell damage, anti-oxidants are a specific type of anti-catabolic agent.

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The body also contains anabolic compounds that stimulate tissue growth. Glucosamine is an amino sugar naturally formed in the body from glucose. When supplied exogenously, glucosamine stimulates connective tissue cell synthesis, and thereby increases the amounts of normal extracellular matrix. Glucosamine is also the building block for glycosaminoglycans in cartilage and other connective tissues. Supplying additional glucosamine thus supplies the body with extra raw materials for matrix synthesis in connective tissues. Other examples of anabolic compounds in the body include somatotropin, which stimulates protein synthesis, and the somatomedins or insulin-like growth factors, which stimulate the proliferation of chondrocytes and fibroblasts and enhance matrix synthesis.

The actions and interactions of these compounds are complex. A given compound may have different effects in different tissues. For example, somatotropin increases protein synthesis (anabolism), but also speeds fat breakdown (catabolism). The effects that a particular compound or combination of compounds will have depend on many factors, including route of administration, dosage, and duration of therapy.

Previous researchers have investigated the use of individual compounds for their anabolic, anti-oxidant or anti-catabolic effects. Glucosamine has been found in cell culture to stimulate connective tissue cells to produce the components of the matrix: collagen and glycosaminoglycans (GAGs). [Jimenez, S., "The Effects of Glucosamine sulfate on Chondrocyte Gene Expression," <u>Eular Symposium</u>, Madrid October 1996 Proceedings, page 8-10]. S-adenosylmethionine is known to participate in several synthesis reactions, including the sulfation of GAGs. [Champe, P. <u>Biochemistry</u>, 2nd edition, J.B. Lippincott Co, Philadelphia, 1994, pp. 248, 250, 265]. Arachadonic acid has been found to stimulate corneal healing. [Nakamura, M., "Arachidonic Acid Stimulates

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Corneal Epithelial Migration", <u>J. Ocul. Pharmacol.</u>, Summer: <u>10(2)</u>: 453-9 (1994)]. These compounds therefore have anabolic effects.

Chondroitin sulfate has been shown to inhibit degradative enzymes, including the metalloproteinases that destroy cartilage matrix. [Bartolucci, C., "Chondroprotective action of chondroitin sulfate," Int. J. Tiss. Reac., XIII(6):311-317 (1991)]. Studies with pentosan sulfate have shown that it prevents complementmediated damage in a rabbit myocardial cells. [Kilgore, K., "The Semisynthetic Polysaccharide Pentosan Polysulfate Prevents Complement-Mediated Myocardial Injury in the Rabbit Perfused Heart," J. Pharmocol. Exp. Ther., 285(3):987-94 (1998)]. Oral administration of collagen type II has been shown to decrease the deleterious immune response that destroys joint tissue in rheumatoid arthritis. Tetracycline analogues are potent inhibitors of matrix metalloproteinases. [Ryan, M., "Potential of Tetracyclines to Modify Cartilage Breakdown in Osteoarthritis." [Curr. Opin. Rheumatol., 8(3): 238-47 (1996)]. Diacerein modifies the inflammatory process by inhibiting interleukin-1 activity, and also by direct effects on lymphocytes and neutrophils. [Beccerica, E., "Diacetylrhein and rhein: in vivo and in vitro effect on lymphocyte membrane fluidity," Pharmocol. Res., 22(3):277-85 (1990); Mian, M., "Experimental Studies on Diacerhein: Effects on the Phagocytosis of Neutrophil Cells from Subcutaneous Carregeenan-Induced Exudate," <u>Drugs Exp. Clin. Res.</u>, <u>13(11)</u>:695-8 (1987); Spencer, C., "Diacerein", <u>Drugs</u>, 53(1):98-106 (1997)]. These compounds can be classed as anti-catabolic agents.

L-ergothionine scavenges hydroxyl radicals and may inhibit singlet oxygen formation, [Han JS. "Effects of Various Chemical Compounds on Spontaneous and Hydrogen Peroxide Induced Reversion in Strain TA104 of *Salmonella typhimurium*," Mutant Res., 266(2):77-84 (1992)], while superoxide dismutase scavenges superoxide radicals [Mathews C., Biochemistry 2nd ed., Benjamin/Cummings Pub. Co., Menlo Park CA, 1996, page 551]. These compounds can be classified as anti-oxidants.

Although these compounds have been investigated individually, to our knowledge no one other than the present inventors has examined the effects of certain combinations of any or all of anabolic, anti-catabolic and anti-oxidant agents to maintain health and to promote healing. According to the present invention, combinations of these agents can be used to maximize appropriate anabolic effects (healing) and decrease undesirable catabolic effects (degradation) and oxidative damage, while at the same time,

causing minimal or no adverse reactions. Therefore, it can be seen that there exists a need to provide compositions that will make use of the beneficial effects of combinations of anabolic agents, anti-catabolic agents, anti-oxidant and/or analgesic agents for the maintenance and repair of connective tissues in humans and animals.

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Summary of the Invention:

The present invention provides novel compositions and methods of treating repairing, and preventing damage to connective tissues in humans and animals using such compositions. Therefore, it is an object of the invention to provide novel compositions of any or all of anabolic, anti-catabolic, anti-oxidant and/or analgesic agents for the protection, treatment and repair of connective tissues in humans and animals.

It is another object of the present invention to provide methods of treating and repairing connective tissue in humans and animals with compositions containing any or all of anabolic, anti-catabolic, anti-oxidant and/or analgesic agents.

It is still another object of the present invention to provide compositions any or all of anabolic, anti-catabolic, anti-oxidant and/or analgesic agents selected from the group consisting of aminosugar, S-adenosylmethionine (SAMe), arachadonic acid (AA), GAG, pentosan sulfate, collagen type II, tetracyclines, diacerin, super oxide dismutase (SOD), L-ergothionine, one or more avocado/soybean unsaponifiables (ASUs), hydroxyproline and analgesics, such as acetaminophen.

It is a further object of the present invention to provide compositions to repair, treat, and prevent damage to connective tissue in humans and animals that contain one or more of the elements selected from the group consisting of aminosugar, SAMe, arachidonic acid, GAG, pentosan sulfate, collagen type II, tetracyclines, diacerin, SOD, L-ergothionine, one or more ASUs, hydroxyproline and analgesics, e.g, acetaminophen.

These and other objects of the present invention are apparent from the detailed description and claims below.

Brief Description of the Drawings

Figure 1 provides a detailed description of the biosynthetic pathway for the creation of GAGs such as chondroitin sulfate.

Figure 2 is the molecular structure of SAMe and its immediate precursor.

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Figure 3 provides a simplified diagram of the function of SOD.

Figure 4 provides some examples of unsaponifiable lipids.

Figure 5 is the molecular structure of acetaminophen.

Detailed Description of the Invention:

The compositions of the present invention, used to treat, repair, and prevent damage to connective tissue, include combinations of anabolic, anti-catabolic, and/or anti-oxidant agents. Ingredients of preferred embodiments include compositions selected from the group consisting of aminosugars, SAMe, AA, GAGs, including pentosan, collagen type II, tetracyclines, diacerin, SOD, L-ergothionine, and one or more ASUs. Optionally, the combinations of the present invention also include one or more analgesics, such as acetaminophen. In addition, the present invention covers methods of administering these novel compositions to humans and animals in need thereof.

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Glucosamine – an example of an aminosugar – is naturally formed in the body from glucose. When supplied exogenously, glucosamine stimulates connective tissue cell synthesis, increasing the amounts of normal extracellular matrix. Glucosamine is also the building block for glycosaminoglycans ("GAGs") in cartilage and other connective tissues, thus, supplying additional glucosamine supplies the body with extra raw materials for matrix synthesis in connective tissues. The aminosugar component of the compositions of the present invention may comprise natural, synthetic or semi-synthetic aminosugars including but not limited to salts of glucosamine including glucosamine hydrochloride and glucosamine sulfate, glucosamine phosphate, and N-acetylglucosamine and salts and/or mixtures thereof. In addition, the term aminosugar is also used herein to encompass aminosugars that may have been chemically modified yet retain their function. Such chemical modifications include but are not limited to esterification, sulfation, polysulfation, acetylation, and methylation. Moreover, it is contemplated that the term

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aminosugar can extend to any composition of matter that is insubstantially different from the aminosugar as above-described.

The GAG component of the compositions of the present invention may comprise natural, synthetic or semisynthetic GAGs, GAG-like compounds, or GAG precursors, including but not limited to chondroitin, hyaluronic acid, glucuronic acid, iduronic acid, keratan sulfate, heparan sulfate, dermatin sulfate, and fragments, salts, and mixtures thereof. In addition, the term GAG as used herein further encompasses GAGs that have been chemically altered yet retain their function. Such modifications include but are not limited to esterification, sulfation, polysulfation, and methylation. In fact, sulfated GAGs are a preferred component of the compositions of the present invention. Hence, mono-sulfated and polysulfated (or oversulfated) GAGs are preferred GAG components of the compositions of the present invention. The term GAGs also is intended to encompass alternative nomenclature for the same group of above-described compounds -- e.g., mucopolysaccharides, proteoglycans, and heparanoids. In addition, the GAG or GAG-like component of the compositions of the present invention may be derived from plant or animal sources, including but not limited to beechwood tree, to forms of animal cartilage including shark cartilage, bovine trachea, whale septum, and porcine nostrils, and to invertebrates such as *Perna canaliculus* and sea cucumber.

Chondroitin sulfate is a preferred GAG. Chondroitin sulfate is the most abundant glycosaminoglycan in articular cartilage and is also present in many other connective tissues in the body. Additionally, chondroitin sulfate competitively inhibits degradative enzymes that degrade connective tissues under conditions of abnormal, excessive inflammation. Chondroitin sulfate is a polymer composed of repeating units of glucuronic acid and sulfated galactosamine. [Lester M. Morrison, M.D. and O. Arne Schjeide, Ph.D., Coronary Heart Disease and the Mucopolysaccharides (Glycosaminoglycans) 12 (1974); Philip C. Champe and Richard A. Harvey, Lippincott's Illustrated Reviews: Biochemistry, 148-50 (2nd ed. 1994)]. One of ordinary skill in the art understands that chondroitin sulfate must have at least two, and potentially many, of these repeating units of glucuronic acid and sulfated galactosamine.

Figure 1 provides a detailed description of the biosynthetic pathway for the creation of GAGs, such as chondroitin sulfate. In addition, the present invention may include fragments of GAGs, such as fragments of chondroitin sulfate. One of ordinary

skill in the art at the time the invention understands that "fragments of glycosaminoglycans" are groups of saccharides that constitute less than two repeating units of the glycosaminoglycan. Hence, it is understood that fragments of these substances would be composed of groups of saccharides that constitute fewer than two of the repeating units of the respective polymer.

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For example, one of ordinary skill in the art understands that fragments of chondroitin sulfate are molecules composed of the saccharides that comprise the repeating units of chondroitin sulfate, but that are present in groups of less than the two repeating units described above. Thus, a molecule composed of a glucuronic acid and sulfated galactosamine would constitute a fragment of chondroitin sulfate. Indeed, there are eight different disaccharide structures that may constitute fragments of chondroitin sulfate. [Timothy E. Hardingham and Amanda J. Fosang, <u>Proteoglycans: Many Forms</u> and Many Functions, FASEB J., 6:861-862 (1992)].

Other naturally occurring glycosaminoglycans may be used in this invention, for example, hyaluronic acid. Also, fragments of the glycosaminoglycans may also be utilized. A person of ordinary skill in the art understands the terms "fragments of chondroitin," "fragments of chondroitin sulfate," "fragments of chondroitin salts," "fragments of glycosaminoglycan" and "chondroitin sulfate fragments," and further understands them to mean groups of saccharides (or salts thereof) that constitute less than two repeating units of the glycosaminoglycan.

One of skill would expect that fragments of chondroitin sulfate, for example, would have the same utility as chondroitin sulfate itself. Chondroitin sulfate is broken down into smaller units within the body, and that it is reformulated in the production of cartilage and other connective tissue. Therefore, it is understood that the body utilizes fragments of chondroitin sulfate in the same manner as it utilizes chondroitin sulfate itself. The same is true with respect to "fragments of chondroitin," "fragments of chondroitin salts," and "fragments of glycosaminoglycan." Each of chondroitin, chondroitin salts and other glycosaminoglycans, if ingested, is broken down by the body and reformulated in the production of cartilage and other connective tissue. Therefore, the body utilizes fragments of chondroitin in the same manner as it utilizes chondroitin itself, utilizes fragments of chondroitin salts in the same manner as it utilizes

chondroitin salts, and utilizes fragments of glycosaminoglycans in the same manner as it utilizes glycosaminoglycans.

Moreover, it is intended that the term GAG can extend to any composition of matter that is insubstantially different from the GAGs as above-described. An example of such a GAG-like compound that is within the scope of the present invention is pentosan polysulfate (PPS) as well as salts thereof such as calcium-derived PPS and sodium PPS. Accordingly, a preferred GAG-like compound that may be used in the compositions of the present invention is PPS.

PPS is a semi-synthetic polysulfated xylan that is a sulfated form of a compound extracted from beechwood hemicellulose consisting of repeating units of (1-4) linked β-D-xylano-pyranoses. More specifically, PPS is produced by extracting these hemicellulose compounds via a series of chemical reactions from the wood, and then adding numerous sulfate groups to the purified polysaccharide chains. This process results in low molecular weight linear polysaccharide chains that carry numerous negatively charged sulfate groups. PPS is a semi-synthetic heparinoid that is considered an oversulfated form of a GAG.

There are several forms of PPS that display the above-described activities. Sodium PPS and a calcium-derived PPS (called CAPPS) may both be used to accomplish the functions of PPS. Each of these forms of PPS exhibit GAG-like activity, and will hereinafter be referred to as GAG-like compounds.

Pentosan's mechanism of action can be summarized as follows:

- Anti-inflammatory activities through stabilization and improvement of microcirculation in the inflamed tissues and through anti-Complement effects (decreases the release of the humoral mediators of inflammation called the Complement cascade).
- 2. Inhibition of chemotaxis of granulocytes, which are white blood cells that contribute to inflammation.
- 3. Stimulatory effect on proteoglycan synthesis.

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4. Stimulatory effects on hyaluronic acid synthesis by synovial fibroblasts.

5. Potent inhibition of catabolic enzymes including, human granulocyte elastase (noncompetitive inhibition), hyaluronidase (competitive inhibition), chondroitin-4-sulfatase and N-acetyl-glucosaminidase at concentrations much more lower than that of NSAIDs.

Other synthetic or semi-synthetic glycosaminoglycans or glycosaminoglycan-like compounds, such as polysulfated glycosaminoglycans, may be used in this invention.

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Diacerein also known as diacetylrhein, is a recently recognized organic compound found in plants of the genus *Cassia*. The active metabolite of diacerin, known as rhein, has anti-inflammatory effects through inhibition of interleukin-1B; consequently collagenase production in articular cartilage is reduced. It reduces the fibrinolytic activity of synovial fibroblasts as well. It also dose-dependently inhibits chemotaxis (attraction of white blood cells) and superoxide anion production (this is one of the "toxic oxygen species" or "free radicals"). These harmful compounds occur spontaneously in the body, especially during destructive inflammation. Diacerein (rhein) has analgesic and antipyretic activities. It reduces the breakdown of chondroitin-4-sulfate resulting in an increase in the ratio of chondroitin-4-sulfate to chondroitin-6-sulfate. (This ratio is pathologically decreased in degenerating cartilage.) Diacerein (rhein) mildly increases prostaglandin synthesis, which allows it to have protective effects on the gastric mucosa. As used in this application and claims, the term "diacerin" includes rhein.

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S-adenosylmethionine (SAMe) is an important endogenous compound, present throughout the body, and taking part in a great number of biologic reactions such as transsulfation reactions. In this role it is an important reactant in the synthesis of many structural components of connective tissues, including proteins and proteoglycans. Thus, SAMe has significant anabolic effects which would enhance the actions of other anabolic agents. SAMe also has anti-inflammatory effects by virtue of its antioxidant action.

SAMe is compound synthesized in the body from adenosine triphosphate ("ATP") and methionine (Fig. 2). It is present in many tissues, including the central nervous system. The primary CNS function of SAMe is to donate methyl groups in the reactions synthesizing various crucial compounds, including neurotransmitters and phospholipids. For example, SAMe facilitates the conversion of

phosphatidylethanolamine to phosphatidylcholine, which forms part of the inner, lipid layer of the plasma membrane. In so doing, SAMe increases membrane fluidity and enhances effectiveness of receptor/ligand binding. [Champe and Harvey, Biochemistry, 1994; Stramentinoli, G., "Pharmacologic Aspects of S-Adenosylmethionine." American J. Med., 83(5A):35 (1987); Baldessarini, F., "Neuropharmacology of S-Adenosyl Methionine," American J. Med., 83(5A):95 (1987); Carney, M., "Neuropharmacology of S-Adenosyl Methionine," Clin. Neuropharmacol., 9(3):235 (1986); Janicak, P., "S-Adenosylmethionine in Depression," Alabama J. Med. Sci. 25(3):306 (1988)]. These functions may also pertain to other methyl donors such as betaine (trimethylglycine), 5methyltetrahydrofolate, folic acid, and dimethylglycine. [Champe and Harvey, Biochemistry, 1994]. Because SAMe takes part in a multitude of reactions, the need for SAMe in the body is always high, and disease states increase the demand. Deficiencies of SAMe are documented to exist in, and contribute to, various pathologic processes. SAMe is essential for the synthesis of sulfated glycosaminoglycans. Supplementation of SAMe would maximize the synthesis of glycosaminoglycans and prevent the ratelimiting effect that would be elicited by a deficiency of this vital compound.

SAMe is also active in reactions that preserve and support cell membranes. This effect is nowhere more important than in the liver. Each liver cell is essentially a system of membranes. Liver function depends on the maintenance of these membranes. For example, ethanol exerts its hepatotoxic effects, in part, by damaging liver cell membranes. Studies have repeatedly shown that supplementation of SAMe has protective effects in the face of ethanol toxicity. [Lieber, C. S., "Biochemical Factors in Alcoholic Liver Disease," Seminars in Liver Disease, 13:2, 1993, Theime Medical Publishers, Inc., New York, NY.]

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Superoxide dismutase is an enzyme present naturally in the tissues of animals and plants, which has recently been investigated as an agent in the management of inflammation. It acts by intercepting toxic oxygen radicals in the intracellular space during destructive inflammatory processes. It does not inhibit prostaglandin biosynthesis, but stops the overproduction of prostaglandins resulting from destructive inflammation. Some of its effects include inhibition of edema formation and inhibition of acute signs of inflammation and the secondary articular changes (stiffness and calcification) in adjuvant-induced arthritis. Having no analgesic effects, it does not

contribute to the overuse of the affected joints that eventually leads to more damage of the articular cartilage, as NSAIDs can. Also, it has no adverse effects on the cardiovascular, central nervous or endocrine systems. Figure 3 provides a simplified diagram of the function of SOD.

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L-ergothionine is an intracellular antioxidant naturally occurring in plants and animals, but not synthesized in human bodies: it comes only from dietary sources. The antioxidant properties of L-ergothionein appear to be related to its ability to scavenge reactive oxygen species (free radicals), chelate various metallic cations, activate antioxidant enzymes such as glutathione peroxidase (SeGPx) and manganese superoxide dismutase (Mn SOD) and to inhibit superoxide-generating enzymes such as NADPH-Cytochrome C reductase, and to affect the oxidation of various hemoproteins such as hemoglobin and myoglobin. Because all body tissues depend on these two oxygen carrier molecules, this characteristic is extremely beneficial. [Brummel, M.C., "In Search of a Physiological Function for L-ergothioneine," Med. Hypotheses, 18(4):351-70 (Dec. 1985); Brummel, M.C., "In Search of a Physiological Function for L-ergothioneine, --II," Med. Hypotheses, 30(1):39-48 (Sept. 1989); Han, J.S., "Effects of Various Chemical Compounds on Spontaneous and Hydrogen Peroxide-Induced Reversion in Strain TA104 of Salmonella typhimurium," Mutat. Res., 266(2):77-84 (April 1992); Arduini, A., "Possible Mechanism of Inhibition of Nitrite-Induced Oxidation of Oxyhemoglobin by Ergothioneine and Uric Acid," Arch. Biochem. Biophys., 294(2):398-402 (May 1992)].

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Collagen Type II also has beneficial effects that help maintain the normal balance between anabolism and catabolism. Specifically, connective tissue diseases may result from autoimmune processes, in which the immune system attacks and catabolizes the individual's own connective tissues as if it were a "foreign invader." Oral administration of collagen Type II can desensitize the immune system, preventing further attack and normalizing immune responses in these individuals. This decreases catabolic processes in the connective tissues and maximize anabolism. Ingestion of collagen type II presents this molecule to the immune cells in the gut-associated lymphoid tissues (GALT, a.k.a., Peyer's patches). Interactions between the collagen molecule and specific cells within the GALT activates mobile immune cells called T suppressor cells. These cells, in turn, moderate the destructive immune reaction against the individual's own collagen type II (in connective tissues).

Compounds in the tetracycline family include tetracycline, doxycycline, tetracycline analogs, and "tetracycline-like" compounds, and have been used therapeutically for their anti-microbial effects. Current research has focused on "tetracycline-like" compounds which possess insignificant antimicrobial effects, but with anti-catabolic effects. Specifically, "tetracycline-like" compounds are polycyclic compounds that inhibit tissue metalloproteinases which degrade extracellular matrix components including collagen and proteoglycans yet have insubstantial anti-microbial effects. This function of these compounds, as well as other compounds in the tetracycline family, may be related to the ability of these compounds to chelate calcium and zinc ions. For example, doxycycline has been shown to inhibit collagenase activity in articular cartilage.

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Certain lipid extracts, termed nonsaponifiable or unsaponifiable, which have been extracted from avocado (genus Persea, especially P. americana) and the soybean (Glycine max), and which could also be extracted from other plants, such as bananas, and organisms, such as algae, have also been studied for their beneficial effects on connective tissues. These nonsaponifiable or unsaponifiable compounds are that part of the plant lipids that do not undergo saponification, i.e., they do not react with alkali to form a soap. There are many such compounds, and any particular avocado extract may contain any number. Examples include fat soluble vitamins (A, D, E, and K), steroids such as phytoestrogens, sterols (bioflavonoids) and volatile essentials oils (terpenes such as menthol, camphor, lycopene, gibberellic acid, limonene, cinnamaldehyde, carotenoids, and ubiquinone, also known as coenzyme Q.) [Mathews, C. K. & van Holde, K. E. Biochemistry, 2nd ed., The Benjamin/Cummings Pub. Co., Inc., 1996, p. 691.]

The avocado/soybean unsaponifiables (ASU) have been used in Europe under the trade name Piascledine and have been used to treat osteoarthritis and other forms of arthritis [Thiers, M. H., "Unsaponifiable constituents of avocado and soya oils. Treatment of certain forms of arthralgia," J. Med. Lyon 53(222):195-8 (Feb. 1972) (article in French)], as well as soft-tissue inflammatory conditions [Trevoux, R., "Unsaponifiable fractions of the avocado and soybean in gynecology," J. Bynecol. Obstet. Biol. Reprod. 6(1):99-105 (Jan. 1977) (article in French); Lamaud, M. E., et al., "Biochemical modifications of connective tissue induced by the non-saponifiables of avocado and soy-bean oils administered percutaneously in the 'hairless' rat," Pathol.

Biol. 26(5):269-74 (May-Jun. 1978) (article in French)]. The mechanism of action of this compound is to stimulate chondrocyte expression of TGF (transforming growth factor) beta 1, TGF beta 2 and plasminogen activator inhibitor 1 ("PAI-1"). By increasing PAI-1, ASU blocks the cascade that leads to metalloprotease activation [Boumediene K., et al., "Avocado/soya unsaponifiables enhance the expression of transforming growth factor beta 1 and beta 2 in cultured articular chondrocytes," Arthritis Rheum. 42(1): 148-56 (Jan. 1999)]. ASU mixtures also reduce the spontaneous production of stromelysins, IL-6, IL-8 and prostaglandin E2 by chondrocytes. Additionally, ASUs decrease the effects of IL-1, and thereby reduce chondrocyte and synoviocyte production of collagenase. [Henrotin, Y. E., et al., "Effects of three avocado/soybean unsaponifiable mixtures on metalloproteinases, cytokines and prostaglandin E2 production by human articular chondrocytes," Clin. Rheumatol. 17(1): 31-9 (1998).]

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TGF beta 1 and 2 are members of a family of homologous polypeptidecytokines. These locally-acting hormones can have paracrine or autocrine effects and are made by a variety of cell types, including lymphocytes, endothelial cells and macrophages. TGF beta has varied effects in different tissues; it generally inhibits epithelial cell metabolism. In connective tissues, however, it has been shown to be an indirect mitogen for fibroblasts and other cells of mesenchymal origin. It also can stimulate cellular production of fibronectin and collagen, and decrease protease activity, resulting in a net increase in matrix production. [Cotran, R. F., Kumar, V. and Robbins, S. L., Eds., Pathologic Basis of Disease, 5th ed., Saunders, 1994, pp. 40-42.]

Stromelysins are a subtype of proteinases that act on a variety of extracellular matrix components, including proteoglycans, laminin, fibronectin, and collagen. Stromelysins are produced by fibroblasts, synoviocytes, and macrophages, among other cell types, under the influence of cytokines such interleukin –1 and tumor necrosis factor alpha. Interleukins and prostaglandins are among the many mediators of inflammation. Reductions in levels of all of these compounds result in a decrease in pain and swelling, which are hallmarks of inflammation.

The fat-soluble vitamins present in ASU mixtures are necessary for growth, and augment the anabolic effects of TGF-beta. Because they stimulate TGF beta and also decrease degradative enzymes, as explained above, ASU mixtures can be said to have both anabolic and anti-catabolic effects. Although some of the effects of ASUs

overlap the effects of other compounds in the present invention, ASUs contribute unique properties to the group of compounds and provide very beneficial effects when used in combination with those other compounds. For example, while glucosamine and ASUs both stimulate anabolic processes in connective tissue cells, these compounds have different cellular mechanisms of action. Glucosamine acts in part through protein kinase C, while the effect of ASUs, as stated above, is through transforming growth factor. Similarly, chondroitin and ASUs have inhibitory effects of IL-1. ASUs, however, inhibit the plasmin cascade, while chondroitin decreases activation of the complement cascade. Osteoarthritis is a complex disease involving interplay of many cytokines at the cellular level. Because the different compounds of the present invention act on different cytokines, they will have synergistic effects when used in appropriate combinations.

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In placebo controlled, double blind trials, ASUs have been shown effective in reducing symptoms of osteoarthritis [Maheu, E., et al., "Symptomatic efficacy of avocado/soybean unsaponifiables in the treatment of osteoarthritis," Arthritis Rheum. 41(1): 81-91 (Jan. 1998); Blotman, F., et al., "Efficacy and safety of avocado/soybean unsaponifiables in the treatment of symptomatic osteoarthritis," Rev. Rheum. Engl. Ed. 64(12): 825-34 (Dec. 1997)]. In these studies, side effects in the intervention groups were similar to those seen in the placebo groups, indicating that ASUs are safe and well tolerated substances. Because the active unsaponifiable components found in avocados and soybeans may also be present in other plants and indeed other organisms, ASUs as used in this invention can include any or all unsaponifiable lipids and/or combinations thereof, regardless of origin, whether from plants or other organisms, or whether semi-synthetically or synthetically derived. Examples of components of ASUs include but are not limited to: limonene, beta carotene, phyloquinone, and giberellic acid. As explained above, ASUs can include any of a number of classes of compounds including but not limited to fat soluble vitamins, steroids, sterols and volatile essentials oils, or any combinations thereof. The invention includes, moreover, compositions which contain one avocado/soybean extract (ASU) or mixtures or combinations of such extracts (more than one ASU). There are many such combinations and all are intended to be included within the present invention.

Hydroxyproline is a compound that occurs normally in the vertebrate body as a necessary component of collagen formation. Like all proteins, collagen's primary

structure (termed the pro-alpha-chain) contains a specific and characteristic sequence of amino acids. Specific for collagen is the presence of proline and lysine in certain locations in the chain. During the formation of collagen, these residues are hydroxylated by enzymes (prolylhydroxylase and lysylhydroxylase) to form hydroxyproline and hydroxylysine. The reducing agent ascorbic acid (Vitamin C) is also necessary for this hydroxylation to occur. Unless hydroxylation occurs, collagen molecules cannot assemble and cross-link, thereby severely limiting the strength of connective tissues. Recognized diseases of collagen formation that are caused by failure of hydroxylation include Ehlers-Danlos syndrome, scurvy, and osteogenesis imperfecta. In addition to the many known conditions caused by collagen abnormalities, it is likely that collagen abnormalities contribute to other diseases in ways that are not yet known.

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Proline is a precursor of hydroxyproline. The two molecules are structurally similar, differing only in the addition of a hydroxyl group. This small structural difference between the two molecules, however, has functional importance, in the same way that small structural differences in the shape of a key can have functional importance. Proline is a cyclic amino acid synthesized in the body from glutamate via several intermediary steps. Because it is normally synthesized in the body, proline is considered a non-essential amino acid. Collagen deficiencies due to the inability to synthesize proline and the resulting lack of proline in the body are poorly documented and are probably rare to non-existent, because a complete lack of proline would be inconsistent with life. As noted above, however, deficiencies of hydroxyproline are well known, and are usually due to the body's inability to hydroxylate proline. [Cotran, Kumar and Robbins, eds., Pathologic Basis of Disease, 1994, page 423.] In cases of hydroxyproline deficiency, therefore, proline supplementation is likely to be of no benefit. Instead, hudroxyproline should be supplemented or administered. It has been documented that many N-substituted derivatives of proline, including hydroxyproline, have anti-rheumatic and analgesic effects and also speed healing. [United States Patent No. 5,827,874.] The mechanism of action is not completely determined but it appears that inhibition of prostaglandins is not involved. [Ionac M., Parnham, M. J., Plauchithiu, M., Brune, K.; Pharmacol. Res. (Jun. 1996) 33:6 367-73.] In an autoradiography study, Kalbhen found that hydroxyproline (Oxaceprol®) increased the intracellular uptake of glucosamine in chicken cartilage. [Kalbhen, D. A., Kalkert,

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B., "Autoradiography studies of the effect of oxaceprol on the metabolism of joint cartilage and in vitro," Z Rheumatolo. (May-Jun 1987) 46:3 136-42.] This study indicates that a synergistic effect would exist if hydroxyproline and glucosamine were administered in combination. Indeed, synergistic effects would result from the combination of hydroxyproline with other ingredients in the present invention: for example, the combination of hydroxyproline with an anti-catabolic agent such as chondroitin sulfate. Hydroxyproline is classed in the present invention as an anabolic agent. Because supplementing hydroxyproline addresses collagen abnormalities and deficiencies that the other ingredients in the present invention do not address, and because hydroxyproline thereby contributes to the structure and function of connective tissue differently than the other ingredients, inclusing hydroxyproline in the compositions of the present invention is beneficial. Other forms and derivatives of hydroxyproline, including oligopeptides, acylated forms, nitrates, salts and other common derivatives, may be used in the present invention. Acetylated hydroxyproline is a preferred form of hydroxyproline for inclusion in the present invention.

The compounds of the present invention have several advantages over existing therapies for connective tissue disorders, such as excellent safety profiles. This is in part related to the fact that these compounds occur normally in the body and in various foods. Another characteristic shared by the compounds is tendency for a slow onset of action. Pharmaceuticals, such as NSAIDs, tend to cause sudden changes in the symptoms of disease. The endogenous compounds in the present invention work more slowly, by normalizing structures and functions within the body. While this action is beneficial, it does mean that symptoms will typically not be relieved immediately. For this reason, an analgesic is included as an optional component of the compositions of the present invention. The analgesic is to be chosen from the group of analgesic compounds that have been shown to have minimal side effects at therapeutic doses, and also to have minimal negative effects on connective tissue synthesis, as corticosteroid drugs and many NSAIDs have been shown to have. The analgesic that may be included in the composition of the present invention therefore is a nonsteroidal analgesic that does not have anti-inflammatory effects. In other words, the analgesic is a nonsteroidal drug that is not an NSAID. Examples of the analgesics of the present invention include

acetaminophen and tramadol. Except as discussed below, the preferred analgesic of the present invention is acetaminophen.

Acetaminophen is an analine derivative analgesic and antipyretic compound working centrally through reversible inhibition of the enzyme cyclooxygenase in the central nervous system. Acetaminophen also blocks the peripheral pain impulse generation in nerve endings throughout the body. It has been used extensively for symptomatic pain relief. The relief of pain is beneficial for more than the obvious humane reasons. Since there are also important links between the emotional centers of the brain and the immune system, the relief of pain, and the resulting elevation in mood, has beneficial effects on inflammation and the many other processes that are modulated by the immune system. For example, the decrease in pain associated with acetaminophen use can lead to decreased chemotaxis of neutrophils and decreased release of cytokines in the abnormal tissue. Decreased pain increases the willingness to move in normal ways, and this movement is itself generally beneficial for connective tissue healing. Although it blocks cyclooxygenase activity, acetaminophen has very little anti-inflammatory activity. Therefore, acetaminophen does not inhibit connective tissue anabolism, as NSAIDs and corticosteroids do, and because it has minimal side effects at therapeutic doses, it is an ideal analgesic agent in the present invention. Another advantage to including a safe analgesic in the present invention is that it will increase the likelihood that patient compliance would be high, i.e., that patients would continue taking the preparations long enough for disease-modifying effects to occur. Studies of isolated chondroprotective agents often have a high rate of drop-out in the early weeks of therapy due to patient perception that the agent is not working. With the addition of an analgesic, patients would be more inclined to continue therapy.

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Because acetaminophen and the other components of this invention have different mechanisms of action, their effects are synergistic and this enables the use of a lower dose of acetaminophen. Acetaminophen acts centrally and also peripherally through effects on substance P, blocking pain perception. Other ingredients in the invention act to reduce the cause of pain by enhancing the structure of connective tissues. Using a low dose of acetaminophen is desirable, because while the drug is useful for analgesia and does not have significant anti-inflammatory effects, it can have harmful effects on the liver and other tissues when large doses are used or the liver is otherwise compromised or

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diseased, such as by long-term alcohol abuse. It has been shown that with therapeutic levels of oral acetaminophen (less than 4 g/day), there was an increased metabolism of acetaminophen in chronically alcoholic patients, which would enhance the potential for liver toxicity. [Girre, C., Hispard, E., Palombo, S., et al., "Increased metabolism of acetaminophen in chronically alcoholic patients," Alcohol Clin. Exp. Res. (Feb. 1993) 17(1): 170-3.] Acetaminophen is the most widely used and recommended nonprescription analgesic and antipyretic medication in the United States. [Rose, S.R., "Subtleties of managing acetaminophen poisoning," Am. J. Hosp. Pharm. (Dec. 15, 1994) 51(24): 3065-8.] Because acetaminophen is widely advertised and readily available over the counter, consumers as well as health care professionals perceive this medication to be nontoxic. Either acute or chronic ingestion of excessive acetaminophen for pain relief can lead to hepatotoxicity (in both a dose-dependent and independent manner) more commonly than previously recognized, especially in those patients with predisposing liver conditions. [Barker, J. D. Jr., et al., "Chronic excessive acetaminophen use and liver damage," Ann. Inern. Med. (Sep. 1977) 87(3):299-301; Fry, S. W., Seeff, L. B., "Hepatotoxicity of analgesics and anti-inflammatory agents," Gastroenterol. Clin. North Am. (Dec. 1995) 24(4): 875-905; Lindgren, A., et al., "Paracetamol-inducted cholestatic and granulomatous liver injuries," J. Intern. Med. (May 1997) 241(5): 435-9.] Therefore, it is not obvious to a person of ordinary skill in the relevant art to use a low dose acetaminophen in combination with the other ingredients of the present invention. In the invention, low dose acetaminophen therapy would comprise administration of less than 2 grams of the drug daily. Moreover, some of the components of the present invention, notably SAMe, directly antagonize the harmful effects of acetaminophen by protecting liver function. It is also advantageous to combine glucosamine and chondroitin sulfate with acetaminophen because studies have shown that acetaminophen alone can lower blood sulfate levels and therefore decrease the synthesis of sulfated glycosaminoglycans in connective tissues. [Van der Kraan, P. M., Vitters, E. L., de Vries, B. J., et al, "The effect of chronic paracetamol administratio to rats on the glycosaminoglycan content of patellar cartilage," Agent Actions (March 1990); 29 (3-4): 218-223.] Administering acetaminophen alone for control of connective tissue pain may not be in the patient's best interest, but is commonly recommended currently. The use of acetaminophen in the

combinations of the present invention represents an unobvious improvement in therapy for patients with connective tissue abnormalites.

Cats are sensitive to acetaminophen because they do not metabolize it effectively (poor hepatic conjugation with glucuronic acid and subsequent depletion of glutathione occurs) [Goodman, A. and Goodman, L., <u>The Pharmacological Basis of Therapeutics</u>, 7th ed., MacMillan Publishing Co., 1985, pp. 692-95; Ahrens, F., <u>Pharmacology</u>, Williams & Wilkins, 1996, pp. 174-75]. Accordingly, acetaminophen is not recommended for use in cats.

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The present invention comprises novel combinations of anabolic agents, anti-catabolic agents and antioxidant agents that maximize beneficial, anabolic effects (healing) and minimize any potential negative effects. In so doing, the present invention provides novel combinations of these agents and anti-oxidant agents, for the protection, treatment and repair of connective tissues in humans and animals. The compounds included in the compositions of the present invention are not limited as to origin, and may be naturally, semi-synthetically or synthetically derived.

These compounds have a variety of beneficial effects on animal and human connective tissues, and, because they function via a variety of mechanisms, work well in combination with each other. Although each compound has a number of functions, they can be roughly grouped as: (1) anabolic agents, including glucosamine, SAMe, AA, ASUs, and hydroxyproline, which promote growth processes in the body; (2) anti-catabolic agents, such as chondroitin sulfate, pentosan sulfate, collagen type II, tetracyclines, diacerin and ASUs, which inhibit destructive or catabolic processes; and (3) antioxidants, such as SOD, and L-ergothionine which prevent tissue damage by scavenging toxic oxygen species (free radicals). Naturally, some compounds, such as ASUs, could be placed in more than one group, by virtue of their overlapping functions. The present invention establishes that combinations of these compounds would work well. In addition, an analgesic could optionally be added to any of the individual compounds recited above or to a combination of them to provide relief from pain. Acetaminophen is the analgesic of choice because it does not have powerful antiinflammatory effects and therefore does not interfere with healing of connective tissue. It also has minimal side effects at therapeutic doses, unlike NSAIDs which may cause gastrointestinal ulceration or poor renal perfusion even at therapeutic doses. Thus, the

present invention consists of various combinations of two or more of the following agents: AA, glucosamine, chondroitin sulfate, pentosan, diacerin, S-adenosylmethionine, superoxide dismutase, L-ergothionein, collagen type II, tetracycline-like compounds, one or more ASUs, hydroxyproline, and, optionally, one or more analgesics, e.g.,

- acetaminophen. Examples include, but are not limited to such combinations as: two anabolic agents (e.g., AA and glucosamine); an anabolic agent and an anti-catabolic agent (e.g., AA and pentosan); an anti-catabolic and an antioxidant (e.g., tetracyclicline and superoxide dismutase); or combinations of more than two agents (e.g., glucosamine, SAMe and AA) or SAMe, ASUs, hydroxyproline, acetaminophen and diacerin.
- Examples of specific compounds that may be present in ASU extracts include but are not limited to: limonene, beta carotene, ubiquinone, and undecaprenol phosphate.

The following table shows possible combinations of pairs of the compounds discussed above. The letter "X" marks novel combinations of compounds that form the novel compositions of the present invention. The invention also includes combinations of three or more agents of the following compounds in the combinations shown on the table:

Glucosamine

Chondroitin

SAMe

20 Pentosan

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Superoxide Dismutase (SOD)

L-Ergothionine

Collagen Type II

Diacerin

25 Arachadonic Acid

Tetracycline like compounds

One or more avocado/soybean unsaponifiables.

Hydroxyproline

Analgesic, e.g., acetaminophen

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As explained above, examples of desired combinations are marked by X. For example, the first X in the first row means a combination of glucosamine and L-ergothionine or

glucosamine and diacerin. The compositions of the present invention additionally comprise any aggregation or addition of the combinations marked by X in any given row or column. For example, the compositions disclosed in the first row include combinations of glucosamine plus L-ergothionine plus diacerin, or glucosamine plus diacerin plus tetracycline-like compounds or glucosamine plus L-ergothionine plus diacerin plus AA plus tetracycline-like compounds, and so on. Examples of compositions disclosed in the column designated "Collagen Type II" would include combinations of collagen Type II plus SAMe plus pentosan, or collagen Type II plus SAMe plus pentosan plus superoxide dismutase plus L-ergothionine, and so on. Examples of compositions disclosed in the column designated "ASU" would include combinations of one or more ASUs plus glucosamine, or one or more ASUs plus SAMe plus pentosan, or one or more ASUs plus collagen Type II plus SAMe plus pentosan plus superoxide dismutase plus L-ergothionine, and so on. Similarly, the table shows that an analgesic, e.g., acetaminophen, can be combined with any other compound listed in the table either singly or in any combination.

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المراجعة ا	= ≤Super-	L-Ergothi-	Collagen		Aracha-	Tetracycline	ASU	Hydrozy-	- Analgesic, e.g.,
	oxide	onine	Type II		donic	like 15		prolim	Acetaminophen
	Dismatase	144 144			Acid	compounds		Ĭ	
	(SOD)			77.70m, 10 77.70m, 10					
Glucosamine		X		Х	X	X	Х	X	X
Chandraitin		X		X	X	X	Х	Х	X
SAMe	Х	X	X	X	X	X	X	Х	X
Pentosan	X	Х	Х	Х	X	Х	X	Х	X
Superoxide Dismettane SOF:		X	Х	X	X	X	Х	X	X
Ergathionine			X	Х	X	X	X	X	X
Collagen				X	X	X	X	Х	X
Diacerin			_		X	X	Х	X	X
Arachadonic Acid						Х	X	X	X
Tetracycline like compounds							X	X	X
ASU								X	Х
Hydroxy- proline									X

The present inventors have investigated certain combinations of the above agents and have documented a novel response in several combinations. The effects of certain combinations of chondroitin sulfate, glucosamine, SAMe, arachidonic acid, collagen, pentosan, and superoxide dismutase were studied in cultures of adult bovine cartilage cells in different experiments (see example 2). Certain combinations had an inhibitory effect (hypometabolic) in this particular study. Both stimulatory and inhibitory novel interactions could be beneficial under various disease states. For example, a hypermetabolic state is part of the pathogenesis of some diseases. In such diseases, an inhibitory (hypometabolic) response would be beneficial to the individual. Future studies are planned to investigate the effects of a range of concentrations in the agents studied under various experimental models. Note that both increases and decreases in biosynthetic activity are novel interactions and could be beneficial to organisms under selected circumstances. For example, many researchers currently believe that

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osteoarthritis has a hypermetabolic component, especially in the early stages of pathogenesis. Researchers are divided as to whether treatment should focus on agents that stimulate cartilage matrix production, or agents that are inhibitory and therefore make the cartilage environment more hypometabolic, which in turn could have a stabilizing effect on the cartilage tissue.

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The compositions of the present invention may be administered via any route, including but not limited to intramuscularly, intravenously, orally, subcutaneously, rectally, topically, transcutaneously, intranasally, and intra-articularly, sublingually, intraperitoneally. Also, any salt of any of the present compounds may be used to aid in absorption, e.g., glucosamine HCl, glucosamine sulfate, glucosamine phosphate, sodium chondroitin sulfate, calcium chondroitin sulfate, potassium chondroitin sulfate, etc. In addition, the composition can be given in all common dosage forms including extended release dosage forms, pills, tablets, capsules, creams, liquids, aerosols, extended release forms, injectables, etc.

The dosage ranges of the compositions of the present invention will vary depending upon the needs of the human or animal to which the compositions are administered. The dosage ranges for the various components of the presently claimed compositions are as follows:

	Daily Dose
Glucosamine	Total dose range: 25 mg to 12 g
	Small animal: 25 mg – 3 g.
	Human: 100 mg – 4 g
	Large animal: 300 mg – 12 g
Chondroitin sulfate	Total dose range: 15 mg – 12 g
	Small animal: 15 mg – 2 g
	Human: 75 mg – 4 g
	Large animal: 300 mg – 12 g
SAMe	Total dose range: 10 mg – 8 g
	Small animal: 10 mg – 1 g
	Human: 75 mg – 3 g
	Large animal: 400 mg – 8 g
Pentosan	Total dose range: 3 mg to 3 g
	Small animal: 3 mg – 1 g
	Human: 50 mg – 2 g
	Large animal: 100 mg – 3 g
Superoxide dismutase	Total dose range: 3 mg to 6 g (each mg containing > 3000
	McCord – Fridovich units)
	Small animal 3 mg – 2 g
	Human: 5 mg – 3 g
	Large animal: 50 mg – 6 g
L-ergothioneine	Total dose range: 50 mg to 25 g
	Small animal: 50 mg – 10 g
·	Human: 50 mg – 15 g
	Large animal: 100 mg - 25 g
Collagen Type II	Total dose range: 0.1 mg to 10 g
	Small animal: 0.1 mg. – 10 g
	Human: 0.1 mg – 7.5 g
	Large animal: 1.0 mg. 10 g

Daily Dose	
Total dose range: 5 mg to 5 g	
Small animal: 5 mg − 1 g	,
Human 20 mg – 3 g	
Large animal: 50 mg - 5 g	
Total dose range: 10 mg to 12 g	
Small animal: 10 mg – 3 g	
Human: 10 mg – 5 g	
Large animal 50 mg – 12 g	
Total dose range: 1.0 mg to 2 g	
Small animal: 1.0 mg - 1 g	´.
Human: 2 mg – 1.5 g	
Large animal: 50 mg – 2 g	
Total dose range: 5 mg to 5 gram	v
Small animal: 5 mg to 1000 mg	
Human: 50 mg to 1500 mg	
Large animal: 100 mg to 5 grams	
Or: 1 mg / kg to 25 mg / kg	
Total dose range: 5 mg to 6 grams	
Small animal: 5 mg to 1500 mg	
Human: 50 mg to 3500 mg	
Large animal: 50 mg to 6 grams	
Total dose range: 4 mg to 10 grams	
Small animal (excluding cats): 4 mg to 1000 mg	
Human: 100 mg to 4 gram	
Large animal: 100 mg to 10 grams	
	Total dose range: 5 mg to 5 g Small animal: 5 mg - 1 g Human 20 mg - 3 g Large animal: 50 mg - 5 g Total dose range: 10 mg to 12 g Small animal: 10 mg - 3 g Human: 10 mg - 5 g Large animal 50 mg - 12 g Total dose range: 1.0 mg to 2 g Small animal: 1.0 mg - 1 g Human: 2 mg - 1.5 g Large animal: 50 mg - 2 g Total dose range: 5 mg to 5 gram Small animal: 5 mg to 1000 mg Human: 50 mg to 1500 mg Large animal: 100 mg to 5 grams Or: 1 mg / kg to 25 mg / kg Total dose range: 5 mg to 6 grams Small animal: 50 mg to 1500 mg Large animal: 50 mg to 1500 mg Human: 50 mg to 3500 mg Large animal: 50 mg to 6 grams Small animal: 50 mg to 6 grams Total dose range: 4 mg to 10 grams Small animal (excluding cats): 4 mg to 1000 mg Human: 100 mg to 4 gram

Doses are designed to cover the spectrum of body weights of small animals to large animals, with humans in the middle. The following examples are illustrative and do not in any way limit the present invention.

EXAMPLE 1

In our preliminary investigations, surgical instability was induced in the stifle joint of New Zealand white rabbits by modification of the Hulth technique. Post-operatively, animals were exercised for 1 hour daily. Experimental dietary formulas were evaluated for their cartilage stabilizing effect. The standard Harland (Teklad) rabbit diet (control); a standard diet also containing a 2% fungal oil containing 40% AA by weight (Arasco); and a standard diet containing also arachidonic acid and glucosamine/chondroitin were investigated. At 16 weeks, the medial femoral condyles of all rabbits were removed and cartilage degeneration quantitatively evaluated with a modified Mankin histological-histochemical grading system with safranin-O stained slides. Cartilage from all joints with surgical instability exhibited varying degrees of macroscopic degenerative lesions. Our preliminary results indicated that adding arachidonic acid to glucosamine/chondroitin sulfate has the potential to produce a novel interaction in cartilage. This novel interaction has the potential to have a cartilage modulating effect.

EXAMPLE 2

20 Procedure:

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Articular cartilage was resected from human or animal joints aseptically and placed into a large petri dish in a small amount of DMEM/F-12 or F-12. The tissue was diced to 1-2 mm dimensions and transferred to a small culture flask containing 20 mL DMEM or F-12 + 400 u/mL collagenase. The flask was placed on the shaker and incubated overnight.

The cell digest was repeatedly aspirated to increase release of cells. The cell digest was then placed into a 50 mL sterile centrifuge tube and centrifuged in the Beckman at 1000 RPM for 10 minutes. The medium was discarded by pipette and fresh DMEM/F-12 containing 1% FCS added. Depending on the size of the pellet, about 20-40 mL medium was added. Cell counts were determined by haemocytometer and the digest made up to a concentration of 100,000 cells/0.2 mL.

GAG Synthesis:

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To conduct GAG synthesis, 0.2 mL was aliquoted into each well of a 96 well plate using an 8 channel pipetter and the cells allowed to attach for 24 hours. The media was removed and 0.3 mL of fresh 1% FCS media added for 2 –3 days. On the day of the experiment, the media was removed and the experimental solutions containing 35-sulfate isotope were added. The incubation was continued for 4 hours. Termination: at the end of the incubation period, the labeling media was removed, the cell layer was rinsed repeatedly with cold 0.3 mL DMEM or F-12 (about 5x), and the cell layer was frozen for counting.

Counting of 96 Well Plates:

The cell layer for both the synthesis experiments were heated at 50 degrees after adding 100 ul 1 N NaOH for a period of 2 hours. 200 ul scintillant was added and the plates were placed in the counter. The data was expressed as CPM/100,000 cells.

Evaluation	Indv. Agents:		Agents	
Agent	CPM/	Sum	Combined	Difference
	100,000 cells	(CPM)	(CPM)	(CPM)
, is				
ChSO4-L	64			
AA	70	134	18	-116
ChS04-II	50			
AA.	. 70	120	81	-39
Glu-H	117		·	
AA	70	187	16	-177
1%Sam	123			
10Paleos	86	209	62	-147

Evaluation	Indv. Agents:		Agents	
Agent	CPM/	Sum	Combined	Difference
	100,000 cells	(CPM)	(CPM)	(CPM)*
	·			
1%Sam	122			
B }	123			
1 Paleos	74	197	80	-117
		_		
3%Sam	42			
1Paleos	74	116	100	-16
3%Sam	42			
10Paleos	86	128	83	-45
<u> </u>				
3%Sam	42			
Collagen	118	160	90	70
	110	100	90	-70
3%Sam				
	42			
AA	70	112	104	-8
		-		·
AA	70			
10Pentos	76	146	106	-40
Collagen	70			
10Paleos	86	156	82	-74
	·			, ,
Collagen	118			
10 Pentos	76	194		100
10 1 CHIOS	/6	194	65	≪-129
Collagen	118		1	
10 Paleos	86	204	77	-127

ChSO4 = Chondroitin

AA = Arachadonic Acid

SAMe = S-adenosylmethionine

5 Paleos = SOD

Collagen = Collagen

Pentos = Pentosan

H = High concentration

L= Low concentration

In this model, at the concentrations studied, the representative combinations had an inhibitory (hypometabolic) effect in this particular study. hypometabolic effect could be beneficial under various disease states, indeed both stimulatory and inhibitory novel interactions could be beneficial under various disease states. For example, a hypermetabolic state is part of the pathogenesis of some diseases. In such diseases, an inhibitory (hypometabolic) response would be beneficial to the Future studies are planned to investigate the effects of a range of individual. concentrations in the agents studied under various experimental models. Note that both increases and decreases in biosynthetic activity are novel interactions and could be beneficial to organisms under selected circumstances. For example, many researchers currently believe that osteoarthritis has a hypermetabolic component, especially in the early stages of pathogenesis. Researchers are divided as to whether treatment should focus on agents that stimulate cartilage matrix production, or agents that are inhibitory and therefore make the cartilage environment more hypometabolic, which in turn could have a stabilizing effect on the cartilage tissue.

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EXAMPLE 3

A 4 year old child has juvenile rheumatoid arthritis in which the immune system inappropriately targets endogenous connective tissues with antibodies against native collagen type II. The resulting inflammation and degradation of cartilage causes pain and dysfunction in the synovial joints. Present treatments include corticosteroids which non-selectively suppress the immune system, thus leaving the body vulnerable to

infectious disease, or methotrexate, which inhibits DNA synthesis, repair, and cellular replication, thus affecting not only the immune system but also intestinal mucosa, and the bone marrow. This child is given 2 mg of collagen type II daily, and SQD 10 mg daily. The collagen decreases the inappropriate immune attack, and the SOD inactivates destructive free radicals that damage cells. By preventing cellular damage, the SOD helps maximize the normal function of joint tissue cells. This combination has no harmful side effects at therapeutic doses and is a beneficial addition to existing therapies for rheumatoid arthritis.

10 EXAMPLE 4

A 6 year old thoroughbred race horse has neutrophilic inflammation of the carpus. In this condition, trauma to the tissues of the joint injures cells and therefore results in liberation of cytokines which attract large numbers of neutrophils into the synovial space. This response is beneficial in cases of sepsis, but in non-septic conditions the neutrophils provide no useful service to the animal. Indeed, because neutrophils produce various degradative compounds, including superoxide molecules, their presence in the joint contributes to a vicious cycle of inflammation, tissue damage, and increased inflammation. Currently this condition is treated with nonsteroidal antiinflammatory drugs, which suppress prostaglandin synthesis and therefore have many side effects. This horse is given a mixture of diacerin 100 mg, pentosan 200 mg and SAMe, 1000 mg The diacerin and pentosan both inhibit chemotaxis (the attraction of white blood cells into the affected area) and thus reduce the numbers of neutrophils in the joint. Additionally, pentosan stimulates the synthesis of synovial fluid and thus supports normal function of the joint. Diacerin inhibits superoxide production; since superoxide production is one of the mechanisms through which neutrophils have their harmful effects, this action of diacerin is obviously beneficial. SAMe supports the structure and function of cell membranes, and therefore helps repair injured joint tissue cells thus blocking the events that start the harmful inflammation. This combination has no harmful side effects at therapeutic doses and is a great improvement over existing therapies.

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EXAMPLE 5

A 47 year-old woman has severe knee osteoarthritis. Currently she requires large doses of NSAIDs to control her symptoms. Although her orthopedic surgeon has recommended taking glucosamine/chondroitin sulfate, she has been reluctant to do so because these compounds are extracted from animal tissues and the patient is a strict vegetarian. Instead she takes diacerein 25 mg and ASU 250 mg, and 500 mg of acetaminophen daily. The diacerin inhibits chemotaxis and thereby reduces inflammation in the knee joint. The ASU increases TGF beta 1 and 2, stimulating repair of damaged joint tissues. The acetaminophen causes rapid analgesia, reducing the patient's symptoms without adversely affecting cartilage metabolism and without risk of gastrointestinal ulceration. As a result of the reduction in pain, the patient decides to add a 15 minute walk to her daily schedule. The controlled exercise further improves her physical and mental state.

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EXAMPLE 6

A 5 year old Jersey dairy cow is diagnosed with severe osteoarthritis following an episode of fever and synovitis attributed to Lyme disease. This animal is the source of the owner's family milk supply and the owner wishes to treat the lameness with compounds that are "natural," i.e., compounds that normally occur in plants and animal bodies, rather than pursuing more traditional solutions such as 1) culling the animal 2) using non-steroidal anti-inflammatory drugs or 3) using steroids. The animal is treated with ASU 900 mg, SAMe 600 mg and glucosamine 500 mg daily. This approach is an improvement over existing options for several reasons. Because the compounds are natural components of plants and animal bodies with documented wide margins of safety, there is less concern over metabolites secreted in the milk. Because the compounds are available orally, and are active in small amounts, they are easy to administer to the animal in feed. The combined effect of the three compounds is to reduce inflammation and pain, to support normal function, and to stimulate healing of connective tissues.

EXAMPLE 7

A 43 yr old nurse with hepatitis B also suffers from osteoarthritis. Due to his liver problem, his use of pharmaceutical analgesics with potential hepatotoxicity is a matter of concern. He is given acetaminophen 500 mg daily, which is a low dose for that analgesic, in combination with 800 mg daily of glucosamine, 800 mg daily of chondroitin sulfate and 900 mg daily of SAMe. These compounds work together to decrease pain, support normal joint tissues and maximize liver function.

10 EXAMPLE 8

A 53 year old man has severe arthritis of his lower back. He currently takes large doses of NSAIDs but suffers from stomach pains and is worried about gastric ulceration. He has tried to substitute glucosamine and chondroitin sulfate for the NSAIDs but did not stay on the therapy because his back pain was too severe without analgesia. He is given hydroxyproline 500 mg daily, acetaminophen 500 mg daily, SOD 600 mg daily and arachidonic acid 300 mg daily.

The acetaminophen controls his pain without gastric upset, the hydroxyproline and arachidonic acid stimulate anabolic processes (but via different mechanisms of action) in the vertebral joints, and the SOD scavenges free radicals thereby decreasing harmful inflammation.

Based on the teaching of the present invention, one of skill in the art would understand that combinations of the compounds taught by the present invention would act synergistically. For example, it is understood that glucosamine has stimulatory effects on chondrocyte metabolism which, by itself, aids in ameliorating diseases of cartilage degradation. However, an increase in cell metabolism can also produce an increase in free-radical production, as a natural by-product of oxidative phosphorylation. The increase in free radical production would dilute the beneficial effects of the glucosamine administration. By combining L-ergothioneine with glucosamine, one would expect an increase in metabolism and a reduction in free-radical damage, providing for a greater benefit than if compounds leading to one of these effects were provided. Therefore, one of skill in the art, based on the teaching of the present

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invention, would understand that combining glucosamine with L-ergothioneine would be more beneficial than providing either alone. The synergy that exists between certain compounds in the present invention also enables the use of lower doses of each compound. Although these compounds are quite safe, there may be a potential for side effects. For example, large doses of glucosamine sulfate or chondroitin sulfate can cause gastrointestinal disturbances in some individuals. In addition, these compounds are costly; for these reasons, the ability to minimize the dose and still achieve beneficial effects is desirable.

Many modifications may be made without departing from the basic spirit of the present invention. Accordingly, it will be appreciated by those skilled in the art that within the scope of the appended claims, the invention may be practiced other than has been specifically described herein. Hence, the attached claims are intended to cover the invention embodied in the claims and substantial equivalents thereto.

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WE CLAIM:

1. A composition for the treatment, repair or prevention of damage to connective tissue comprising one or more avocado/soybean unsaponifiables and one or more compounds selected from the group consisting of aminosugars, GAGs, GAG-like compounds, pentosan, SAMe, SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such avocado/soybean unsaponifiable and each such compound may be naturally, semi-synthetically or synthetically derived.

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2. A composition for the treatment, repair or prevention of damage to connective tissue comprising hydroxyproline, including its salts or derivatives, and one or more compounds selected from the group consisting of aminosugars, GAGs, GAG-like compounds, pentosan, SAMe, SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, tetracycline-like compounds, and one or more ASUs, wherein each such hydroxyproline, salt and derivative thereof and each such compound may be naturally, semi-synthetically or synthetically derived.

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3. A composition for the treatment, repair or prevention of damage to connective tissue comprising a non-steroid, non-NSAID analgesic and one or more compounds selected from the group consisting of aminosugars, GAGs, GAG-like compounds, pentosan, SAMe, SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, tetracycline-like compounds, one or more ASUs and hydroxyproline, including its salts or derivatives, wherein each such analgesic and each such compound may be naturally, semi-synthetically or synthetically derived.

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4. The composition of claim 3 in which the analgesic is selected from the group consisting of acetaminophen and tramadol.

5. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 1 to a human or animal in need thereof.

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A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 2 to a human or animal in need thereof.

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7. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 3 to a human or animal in need thereof.

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8. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering any of the compositions of claim 4 according to a protocol wherein the dose of acetominophen is reduced to the minimum level necessary to control connective tissue pain.

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9. A composition for the treatment, repair or prevention of damage to connective tissue comprising one or more aminosugars and one or more compounds selected from the group consisting of L-ergothionine, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such aminosugar and each such compound may be naturally, semi-synthetically or synthetically derived.

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10. A composition for the treatment, repair or prevention of damage to connective tissue comprising one or more GAGs and one or more compounds selected from the group consisting of L-ergothionine, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such GAG and each such compound may be naturally, semi-synthetically or synthetically derived.

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11. A composition for the treatment, repair or prevention of damage to connective tissue comprising SAMe and one or more compounds selected from the group consisting of SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein said SAMe and each such compound may be naturally, semi-synthetically or synthetically derived.

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A composition for the treatment, repair or prevention of damage to connective tissue comprising pentosan and one or more compounds selected from the group consisting of SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such pentosan and each such compound may be naturally, semi-synthetically or synthetically derived.

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A composition for the treatment, repair or prevention of damage to connective tissue comprising a GAG-like compound and one or more compounds selected from the group consisting of SOD, L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein each such GAG-like compound and each such other compound may be naturally, semi-synthetically or synthetically derived.

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14. A composition for the treatment, repair or prevention of damage to connective tissue comprising SOD and one or more compounds selected from the group consisting of L-ergothionine, collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein said SOD and each such compound may be naturally, semi-synthetically or synthetically derived.

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15. A composition for the treatment, repair or prevention of damage to connective tissue comprising L-ergothionine and one or more compounds selected from the group consisting of collagen type II, diacerin, arachadonic acid, and tetracycline-like compounds, wherein said L-

ergothionine and each such compound may be naturally, semisynthetically or synthetically derived.

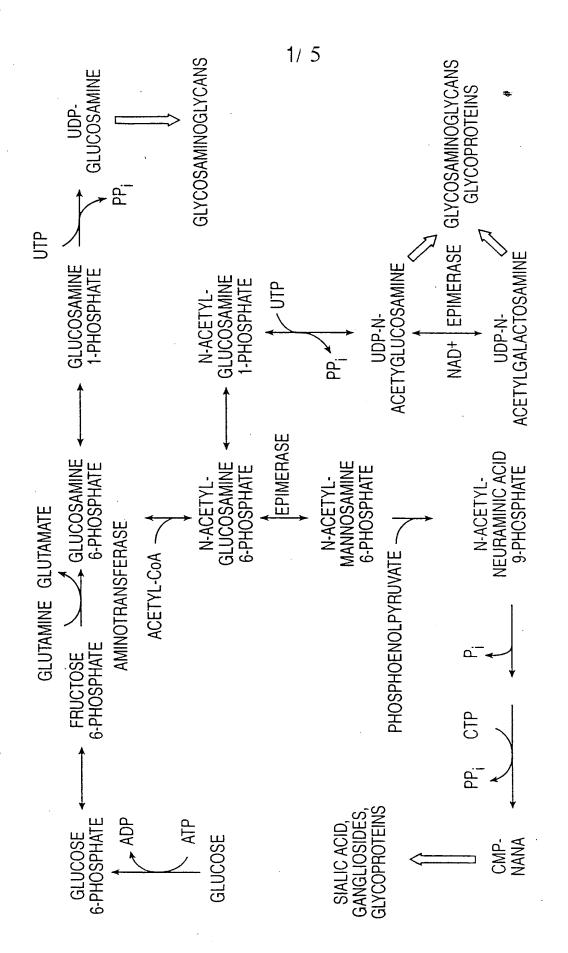
- 16. A composition for the treatment, repair or prevention of damage to connective tissue comprising collagen type II and one or more compounds selected from the group consisting of diacerin, arachadonic acid, and tetracycline-like compounds, wherein said collagen type II and each such compound may be naturally, semi-synthetically or synthetically derived.
- 17. A composition for the treatment, repair or prevention of damage to connective tissue comprising diacerin and one or more compounds selected from the group consisting of arachadonic acid, and tetracycline-like compounds, wherein each such diacerin and each such compound may be naturally, semi-synthetically or synthetically derived.
 - 18. A composition for the treatment, repair or prevention of damage to connective tissue comprising arachadonic acid and tetracycline-like compounds, wherein said arachadonic acid and tetracycline-like compounds may be naturally, semi-synthetically or synthetically derived.
 - 19. A method of preventing, treating or repairing damage to connective tissue in humans and animals comprising administering the compositions of any one of claims 9-18 to a human or animal in need thereof.

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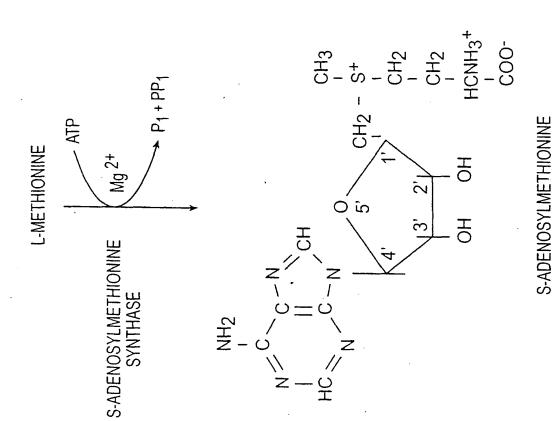
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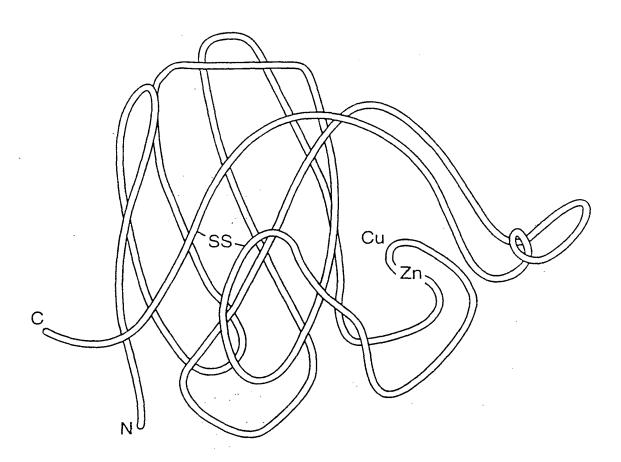
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THE SYNTHESIS OF GLYCOSAMINOGLYCANS FROM GLUCOSAMINE

FIG. 1





SIMPLIFIED DIAGRAM OF THE THREE-DIMENSIONAL STRUCTURE OF A SUBUNIT OF BOVINE SUPEROXIDE DISMUTASE

FIG. 3

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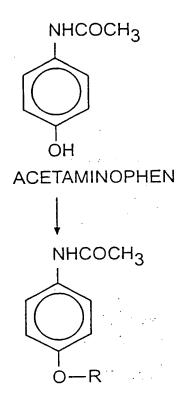
GIBBEREILLIC ACID

EXAMPLES OF UNSAPONIFIABLE LIPIDS

FIGURE 4

SUBSTITUTE SHEET (RULE 26)

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CONJUGATED ACETAMINOPHEN R=GLUCURONATE (MAJOR) SULFATE (MINOR)

ACETAMINOPHEN AND ITS CONJUGATE

FIGURE 5

INTERNATIONAL SEARCH REPORT

International application No. PCT/US99/12152

IPC(6) :	SIFICATION OF SUBJECT MATTER A01N 37/18, 37/00, 43/04, 43/50, 43/46, 65/00 514/629, 560, 23, 154, 398, 424; 424/548, 195.1 International Patent Classification (IPC) or to both n.	ational classification and IPC				
B. FIELI	DS SEARCHED					
Minimum do	cumentation searched (classification system followed	by classification symbols)				
U.S. :	514/629, 560, 23, 154, 398, 424 ; 424/548, 195.1					
Docum <i>e</i> ntati	on searched other than minimum documentation to the	extent that such documents are included	in the fields searched			
	ata base consulted during the international search (nar MPOUNDS AND METHODS OF USE	ne of data base and, where practicable,	search terms used)			
C. DOC	UMENTS CONSIDERED TO BE RELEVANT					
Category*	Citation of document, with indication, where app	propriate, of the relevant passages	Relevant to claim No.			
A,P	WO 98/48816 A1 (NUTRAMAX NOVEMBER 1998, see entire abstract		1-19			
A	US 5,637,616 A (SHARP et al) 10 JUNE 1997, see entire document					
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Furti	ner documents are listed in the continuation of Box C	. See patent family annex.				
"A" do to	social categories of cited documents: comment defining the general state of the art which is not considered be of particular relevance riter document published on or after the international filing date comment which may throw doubts on priority claim(s) or which is ted to establish the publication date of another citation or other	"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention "X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone				
special reason (as specified) *O* document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art						
	ocument published prior to the international filing date but later than e priority date claimed	*&* document member of the same pate	nt family			
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